



**Exhibit A - Property Description**

**Owner: CONNIE HICKS, P.O. BOX 267, Eureka, NV 89316-0267**  
**Project: HICKS, 80 O'NEIL ST., Eureka, NV 89316**

The following is a complete legal description, to the best of our knowledge, of the property to be liened. Information for this exhibit was obtained through the Recorder's Office where the property is located, or from other sources.

**LOTS 1 THROUGH 5, BLOCK 73, TOWNSITE, RECORDS OF EUREKA COUNTY, STATE OF NEVADA.**

**COPY**



**217107**

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**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)  
 a) 001-091-07  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property:  
 a)  Vacant Land      b)  Single Fam. Res.  
 c)  Condo/Twnhse    d)  2-4 Plex  
 e)  Apt. Bldg            f)  Comm'/Ind'l  
 g)  Agricultural        h)  Mobile Home  
 Other

FOR RECORDER'S OPTIONAL USE ONLY  
 Book: \_\_\_\_\_ Page: \_\_\_\_\_  
 Date of Recording: \_\_\_\_\_  
 Notes: \_\_\_\_\_

3. Total Value/Sales Price of Property \$ 0  
 Deed in Lieu of Foreclosure Only (value of property) ( 0 )  
 Transfer Tax Value: \$ 0  
 Real Property Transfer Tax Due \$ 0

4. If Exemption Claimed:  
 a. Transfer Tax Exemption per NRS 375.090, Section 5  
 b. Explain Reason for Exemption: Transfer from mother to son

5. Partial Interest: Percentage being transferred: 0 %  
 The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Connie J. Hicks Capacity Seller  
 Signature Bill Hicks Capacity SON

**SELLER (GRANTOR) INFORMATION (REQUIRED)**  
 Print Name: Connie J. Hicks  
 Address: PO Box 367  
 City: Eureka  
 State: NV Zip: 89316

**BUYER (GRANTEE) INFORMATION (REQUIRED)**  
 Print Name: William E. Hicks  
 Address: PO Box 95  
 City: Eureka  
 State: NV Zip: 89316

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**  
 Print Name: \_\_\_\_\_ Escrow #: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_