

RECORDING REQUESTED BY :  
KENT TAYLOR )  
5402 Bull Run Circle )  
Austin, Texas 78727 )



00023025202502547890020022  
KATHERINE J. BOWLING, CLERK RECORDER

SEND FUTURE TAX STATEMENTS TO:  
AND WHEN RECORDED MAIL TO:  
Bryan and Elissa Snowden )  
c/o Tanisha Snowden )  
525 East Oak Street )  
Ironwood, MI. 49938 )

## GRANT DEED

**Kent Taylor, as Grantor**, for the consideration of Eight Thousand Nine Hundred Dollars even (\$8,900.00), hereby conveys, grants and deeds to **Elissa Cuesenza-Snowden, Bryan Barton, Anisha Snowden, Dale Francom**, as joint tenants with rights of survivorship, as **Grantee**, the following property locally known as, and furthermore described as: **APN#: 005-700-26 ; T29N, R49E, section 31, portion of the SE4NE4SW4 & W2NWSSE4, Eureka County Nevada.**

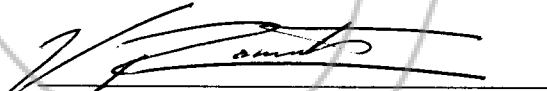
On this 2<sup>nd</sup> day of June 2025, in the County of Williamson, State of Texas,  
I/we herewith sign this Grant Deed.

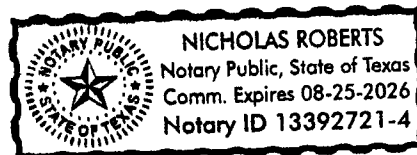
  
KENT TAYLOR

State of Texas )  
                          ) ss  
County of Williamson )

On this the 2<sup>nd</sup> day of June 2025, before me, the undersigned, a notary public in and for said County and State, personally appeared Kent Taylor, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

  
Signature of Notary



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

**1. Assessor Parcel Number(s)**

- a) 005-700-26  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

**2. Type of Property:**

- |  |  |
|--|--|
| a) <input checked="" type="checkbox"/> Vacant Land | b) <input type="checkbox"/> Single Fam. Res. |
| c) <input type="checkbox"/> Condo/Townhome         | d) <input type="checkbox"/> 2-4 Flr          |
| e) <input type="checkbox"/> Apt. Bldg              | f) <input type="checkbox"/> Comm/Ind'l       |
| g) <input type="checkbox"/> Agricultural           | h) <input type="checkbox"/> Mobile Home      |
| Other _____  |  |

**FOR RECORDER'S OPTIONAL USE ONLY**

Book: \_\_\_\_\_ Page: \_\_\_\_\_  
Date of Recording: \_\_\_\_\_  
Notes: \_\_\_\_\_

**3. Total Value/Sales Price of Property**

Deed in Lieu of Foreclosure Only (value of property) \_\_\_\_\_

Transfer Tax Value: \_\_\_\_\_

Real Property Transfer Tax Due \_\_\_\_\_

\$ 8900  
\_\_\_\_\_  
\$ 8900  
\$ 35.10 + 37 = 72.00

**4. If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section \_\_\_\_\_

b. Explain Reason for Exemption: \_\_\_\_\_

**5. Partial Interest: Percentage being transferred: 100 %**

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 [Signature] Capacity seller

Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION  
(REQUIRED)**

Print Name: Kent Taylor  
Address: 5402 Bull Run Circle  
City: Austin  
State: TX Zip: 78721

**BUYER (GRANTEE) INFORMATION  
(REQUIRED)**

Print Name: Shawden-Barker-Francom et al  
Address: 525 E. Oak Street  
City: Ironwood  
State: MI Zip: 49938

**COMPANY/PERSON BROUGHTING RECORDING (required if not seller or buyer)**

Print Name: Seller Record #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED**