

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
 a) 1320-30-713-027
 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'l/Ind'l
 g) Agricultural h) Mobile Home
 i) Other _____

FOR RECORDERS OPTIONAL USE ONLY	
BOOK _____	PAGE _____
DATE OF RECORDING: _____	
NOTES: <u>Trust Verified</u>	

3. Total Value/Sales Price of Property: \$ n/a
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ n/a
 Real Property Transfer Tax Due: \$ \$0.00

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # 7
 b. Explain Reason for Exemption: This is a transfer to a living trust for estate planning purposes, not pursuant to a sale. - WITHOUT CONSIDERATION

5. Partial Interest: Percentage being transferred: 100.0%

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 Robert L. Horton Marguerite Horton Capacity Grantors

Signature Robert L. Horton Marguerite Horton Capacity Grantee/trustees

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Robert Lewis Horton & Marguerite Horton
 Address: 7822 Lopez Ct.
 City: Sacramento
 State: CA Zip: 95829

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Robert Horton & Marguerite Horton, Co-Trustees
 Address: 7822 Lopez Ct.
 City: Sacramento
 State: CA Zip: 95829

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)
 Print Name: Quinton J. Miller, Attorney Escrow # _____
 Address: 9401 E. Stockton Blvd., Ste. 210
 City: Elk Grove State: CA Zip: 95624

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)