



STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessor Parcel Number(s)  
 a) 1221-04-001-016  
 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 OK</u>          |            |

3. Total Value/Sales Price of Property: \$ \_\_\_\_\_  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
 Transfer Tax Value: \$ \_\_\_\_\_  
 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: Transfer without consideration to or from a trust when a certificate of trust is presented upon recordation

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

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 *Paula R...* Capacity PARALEGAL

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

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

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

Print Name: Joel T. and Patricia L. Osborne  
 Address: 2416 Mt. Como Rd.  
 City: Gardnerville  
 State: NV Zip: 89410

Print Name: Osborne Family Living Trust - 2017  
 Address: 2416 Mt. Como Rd.  
 City: Gardnerville  
 State: NV Zip: 89410

**COMPANY/PERSON REQUESTING RECORDING**

(required if not the seller or buyer)

Print Name: Law Office of Tory D Allen Escrow # \_\_\_\_\_  
 Address: 3715 Lakeside Drive, Suite A  
 City: Reno State: NV Zip: 89509