

STATE OF NEVADA
DECLARATION OF VALUE

1 Assessor Parcel Number(s)
 a) 1022-16-001-109
 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 _____	

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

4 If Exemption Claimed
 a Transfer Tax Exemption per NRS 375 090, Section # 10
 b Explain Reason for Exemption Conveyance of real property by deed which becomes effective upon the death of the grantor per NRC 111 655 to 111 699, inclusive

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 Irma M Faulkner Capacity GRANTOR
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name Irma M Faulkner
 Address 1505 Topaz Ranch Dr
 City Wellington
 State NV Zip 89444

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name Vicky Diane Lopez
 Address 1505 Topaz Ranch Rd
 City Wellington
 State NV Zip 89444

COMPANY/PERSON REQUESTING RECORDING

(required if not the seller or buyer)

Print Name _____ Escrow # _____
 Address _____
 City _____ State _____ Zip _____

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