

Quitclaim Deed

140004

By this instrument dated _____, for a valuable consideration,

WALLY LESLIE, AM UNMARRIED MAN

do _____ hereby REMISE, RELEASE, and FOREVER QUITCLAIM to

GARY S..GASPAR AND MARGIT GASPAR, STEPHEN G GASPAR 4441 Ash Ave. L.V. Nv. 89110
the following described real property in the State of Nevada, County of EUREKA

NORTHEAST 1/4 NORTHWEST 1/4 SOUTHEAST 1/4
Section 1, Township 29 North, Range 48 East,

M.D.B. & M.
S.M.

APN: 5-420-04

STATE OF NEVADA
COUNTY OF CLARK

) ss.

On February 20, 1992 before me,
the undersigned, a Notary Public in and for said County and State,
personally appeared

WALLY LESLIE

known to me to be the person whose names
subscribed to the within instrument, and acknowledged
to me that HE executed the same.

WITNESS my hand and Official Seal,

Wally Leslie

Order No. _____

(SEAL)

Lori Chacartegui

(SIGN)

Notary Public Commissioned for said County and State.



NOTARY PUBLIC
STATE OF NEVADA
County of Clark
Lori Chacartegui
My Appointment Expires Jan 23, 1994

AFTER RECORDING MAIL TO

BOOK 232 PAGE 248
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Margit Gaspar
92 FEB 27 AM 1:45

EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. 140004
FEE \$500

EUREKA
COUNTY, NEVADA
DECLARATION OF VALUE

Recording Date 2/27/92 Book 232 Page 248 Instrument # 140004

Full Value of Property Interest Conveyed

\$ 1800.00

Less Assumed Liens & Encumbrances

- - -

Taxable Value (NRS 375.010, Section 4)

\$ 1800.00

Real Property Transfer Tax Due

\$ 2.60

If exempt, state reason. NRS 375.090, Section _____ Explain:

☐ Escrow Holder only: Check if Real Property Transfer Tax is to be deferred under NRS 375.030, Section 3.

INDIVIDUAL

Under penalty of perjury, I hereby declare that the above statements are correct.

Wally Leslie
Signature of Declarant

Wally Leslie
Name (Please Print)

261 Westchester #184
Address

LAS VEGAS, NEVADA 89109
City State Zip

ESCROW HOLDER

Under penalty of perjury, I hereby declare that the above statements are correct to the best of my knowledge based upon the information available to me in the documents contained in the escrow file.

Signature of Declarant

Name (Please Print)

Escrow Number

Firm Name

Address

City State Zip

Tax paid for the above transfer on Feb 27, 19 92, per NRS 375.030, Section 3.

Debbie Etchegaray - Deputy
Signature of Recorder or Representative