

141666  
QUITCLAIM DEED

THIS INDENTURE WITNESSETH: That JAMES W. PORTH and CAROL H. PORTH  
husband and wife as joint tenants

in consideration of \$ 1.00 the receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to  
James W. Porth and Carol H. Porth as trustees of the  
James W. Porth and Carol H. Porth Living Trust

all that real property situate in the CVR&EU #3 County of Eureka  
State of Nevada, bounded and described as follows:

Lot 7 of Block 13 of CRESCENT VALLEY RANCH & FARMS  
Parcel 3-003-06 Roll 02437

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

Witness our hand on this 2nd day of July 1992

Carol H. Porth TTE  
James W. Porth TTE

STATE OF California  
County of Orange } ss.

On this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_  
personally appeared before me, a Notary Public in and for said  
County and State, \_\_\_\_\_

known to me to be the person described in and who executed  
the foregoing instrument, who acknowledged to me that he  
executed the same freely and voluntarily and for the uses and  
purposes therein mentioned.

Notary Public in and for said County and State.

ESCROW NO. N/A

WHEN RECORDED MAIL TO: James W. & Carol H. Porth,  
trustees of the James W. Porth and Carol H. Porth  
Living Trust

532 De Anza Drive  
Corona del Mar, CA 92625

BOOK 237 PAGE 001

ALL-PURPOSE ACKNOWLEDGMENT

State of California }  
County of Orange }

On July 2, 1992 before me, Mary E. Butts, Notary Public,  
personally appeared Carol H. Parth & James W. Parth

( ) personally known to me - OR - ( T ) 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 the entity upon behalf  
of which the person(s) acted executed the instrument.

Witness my hand and official seal.

Mary E. Butts  
Signature of Notary



CAPACITY CLAIMED BY SIGNER

- ☒ INDIVIDUAL(S)  
☐ CORPORATE  
OFFICER(S) \_\_\_\_\_ TITLE(S) \_\_\_\_\_  
☐ PARTNER(S)  
☐ ATTORNEY-IN-FACT  
☐ TRUSTEE(S)  
☐ SUBSCRIBING WITNESS  
☐ GUARDIAN/CONSERVATOR  
☐ OTHER: \_\_\_\_\_

SIGNER IS REPRESENTING:  
NAME OF PERSON(S) OR ENTITY(IES)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to unauthorized document.

THIS CERTIFICATE  
MUST BE ATTACHED  
TO THE DOCUMENT  
DESCRIBED AT RIGHT:

Title or Type of Document Quitclaim Deed  
Number of Pages 1 Date of Document 7-2-92  
Signer(s) Other Than Named Above \_\_\_\_\_

BOOK 237 PAGE 000  
OFFICIAL RECORDS  
Susan Medwed  
'92 JUL 21 A8:44

EUREKA COUNTY, NEVADA  
M.N. REBALEATI, RECORDER  
FILE NO. 141666 FEE \$ 6.00

BOOK 237 PAGE 002

EUREKA COUNTY, NEVADA  
DECLARATION OF VALUE

Recording Date 7/21/92 Book 237 Page 001 Instrument # 141666

Full Value of Property Interest Conveyed \$ \_\_\_\_\_

Less Assumed Liens & Encumbrances — \_\_\_\_\_

Taxable Value (NRS 375.010, Section 4) \$ \_\_\_\_\_

Real Property Transfer Tax Due \$ -0-

If exempt, state reason. NRS 375.090, Section \_\_\_\_\_. Explain:

Transfer into Living Trust

☐ 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.

James W. Porth & Carol H. Porth  
Signature of Declarant

JAMES W. PORTH & CAROL H. PORTH  
Name (Please Print)

532 De Anza Drive  
Address

Corona del Mar, CA 92625  
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 July 21, 19 92, per NRS 375.030, Section 3.

Debbie Etchegaray Deputy  
Signature of Recorder or Representative