

Quit Claim Deed

THIS INDENTURE WITNESS THAT THE GRANTOR(S): DAWN OLAR

for and in consideration of Ten DOLLARS

Dollars (\$ 10.00)

do hereby QUIT CLAIM the right, title and interest, if any, which GRANTOR may have in all that real property, the receipt of which is

hereby acknowledged, to the GRANTEE(S): JEFF LYNN

whose street address is (if applicable): Hc 66 Box 6 Unit 2 Beowawe, NV 89801

situate in the City of

State of NEVADA

, bounded and described as follows: (Set forth legal description)

7-31N, R 48E Section 5 EA, EA, NW 1/4

ASSESSORS PARCEL NO. (APN#) 5-010-05

Together with all and singular hereditament and appurtenances therunto belonging or in any way appertaining to.

In Witness Whereof, I/We have hereunto set my hand/our hands on

Dawn Olar

Signature of Declarant

Dawn Olar

(Print or type name here)

Signature of Declarant

(Print or type name here)

STATE OF NEVADA
COUNTY OF ELKO

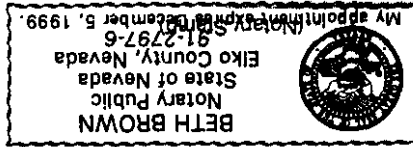
This instrument was acknowledged before me on (date) 19 June 1997

By (person's appearing before notary public) Dawn Olar

Beth Brown

(Signature of Notary Public)

My commission expires: 5 Dec 1999



CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE

RECORDING REQUESTED BY AND MAIL TAX STATEMENTS TO

THIS SPACE FOR RECORDERS USE ONLY

NAME:

ADDRESS:

CITY/ST/ZIP:

BOOK 310 PAGE 30

OFFICIAL RECORDS

RECORDED AT THE REQUEST OF

[Signature]
97 JUL -8 PM 1:07

EUREKA COUNTY NEVADA

M.M. REBALEATI, RECORDER

FILE NO. 167492

FEE \$ 2.00

DECLARATION OF VALUE
Zunzka
 COUNTY, NEVADA

Other property

Recording Date

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Instrument # *167492*

Full Value of Property Interest Conveyed

\$ *26,000*

Less Assumed Liens & Encumbrances

Taxable Value (NRS 375.010, Section 4)

\$

Real Property Transfer Tax Due

\$ *26.00*

If exempt, state reason. NRS 375.090, Section 3. Explain:

Plan 700 exempt

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.

Jeffrey A. Zunzka
 Signature of Declarant

JEFFREY A. ZUNZKA
 Name (Please Print)

4566 UNIT 2 BOKO
 Address

Bloomington NV 89801
 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 per NRS 375.030 Sec. 3 on _____