

Quitclaim Deed

Dated this 9th day of February, 1998

For valuable consideration, the sum of Ten and no/100

DOLLARS (\$ 10.00)

the receipt of which is hereby acknowledged,

I and/or We,

Arlene Nuttall formally Arlene Anderson

Do hereby REMISE, RELEASE, and FOREVER QUITCLAIM to:

Jerry Lee Anderson

as

the following described real property in the State of Nevada, County of Eureka

(Set forth legal description of real property AND commonly known address, if known)

Township 20 North, Range 53 East MDB&M Southwest Quarter (SW 1/4) Section 17 160 Acres

ASSESSORS PARCEL NO. (APN) 07-330-14

IN WITNESS WHEREOF, I/We hereunto set my hand/our hands this

day of

'19

Signature

Arlene Nuttall

Signature

(Print name here)

(Print name here)

STATE OF NEVADA

COUNTY OF HUMBOLDT

}
) ss
}

This instrument was acknowledged before me on

MARCH 30, 1998

(date)

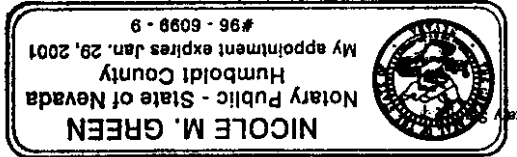
By *Jerry Anderson*

(Names of Person(s))

ARLENE NUTTALL

Notary Public

Nicole M. Green



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BOOK 318 PAGES 30

170007

BOOK 318 PAGE 530
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Jerry Anderson
98 APR 10 PM 2:46
LUREKA COUNTY & NEVADA
M.M. NEBALLEATI, RECORDER
FILE NO.
FEES 7.00

SPACE BELOW THIS LINE FOR RECORDERS USE ONLY

RECORDING REQUESTED BY AND MAIL TO

NAME

ADDRESS

CITY/ST/ZIP

If applicable mail tax statements to

NAME

ADDRESS

CITY/ST/ZIP

Jerry Anderson
PO Box 87
Eureka, NV 89316

DECLARATION OF VALUE
Esurelca
 COUNTY, NEVADA

Recording Date _____ Book _____ Page _____ Instrument # _____

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: Spouse to spouse

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

INDIVIDUAL _____ ESCROW HOLDER _____

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

Signature of Declarant _____
 Name (Please Print) Berry Anderson

Address Box 87
Esurelca NV 89316
 State _____ Zip _____

Signature of Declarant _____
 Name (Please Print) _____

Escrow Number _____
 Firm Name _____

Address _____
 City _____ State _____ Zip _____

City _____ State _____ Zip _____

Address _____

City _____ State _____ Zip _____

• Tax paid for the above transfer per NRS 375.030 Sec. 3 on 4/10/98