

RPTT 0

171973

Quitclaim Deed

Dated this 5 day of MARCH, 19 99

For valuable consideration, the sum of TEN AND NO/100 DOLLARS

DOLLARS (\$10⁰⁰)

the receipt of which is hereby acknowledged,

I and/or We, FRANK ABERCROMBIE

, the undersigned Grantor's,

Do hereby REMISE, RELEASE, and FOREVER QUITCLAIM to:

LOUISE ABERCROMBIE

, Grantee's,

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)

PARCEL 3 AS SHOWN ON MAP FOR ERNEST W. TAYLOR AND DONNA A. TAYLOR - FILED IN COUNTY RECORDER'S OFFICE OF EUREKA COUNTY, STATE OF NEVADA ON DEC. 1, 1989 FILE # NO. 130799, PORTION OF LOT 9 SECT. 29, TOWNSHIP 20 NO. RANGE 53 EAST, M.D. B. + M.

ASSESSORS PARCEL NO. (APN) 07-380-72

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

5th day of MARCH

, 19 99

Frank Abercrombie
Signature

FRANK ABERCROMBIE
(Print name here)

Signature

(Print name here)

STATE OF NEVADA

}

COUNTY OF EUREKA

} ss

This instrument was acknowledged before me on

MARCH 5, 1999

(date)

By Frank Abercrombie

RECORDING REQUESTED BY AND MAIL TO

NAME LOUISE ABERCROMBIE

ADDRESS P.O. BOX 184

CITY/ST/ZIP EUREKA, NV 89316

If applicable mail tax statements to

DECLARATION OF VALUE

Eureka COUNTY, NEVADARecording Date 3/5/99 Book 326 Page 89 Instrument # 171973

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:

From husband to wife☐ 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.

Edna Louise Abercrombie
Signature of DeclarantEdna Louise ABERCROMBIE
Name (Please Print)P.O. Box 184
AddressEureka, NV 89316
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 3/5/99