

QUITCLAIM DEED

172518

APN #: 005-410-04

The Undersigned grantor(s) declare(s): This conveyance transfers the grantor(s) interest into a Revocable Living Trust. There is no consideration for this transfer. (Documentary transfer Tax -0-.)

LELAND V. GARDNER and LOLA M. GARDNER, Husband and Wife as Husband and Wife as Joint Tenants

Hereby REMIS, RELEASES and QUITCLAIMS to: LELAND V. GARDNER and LOLA M. GARDNER Trustee(s) of THE GARDNER TRUST, Dated 7-21-99,

The following described real property in the City of _____, County of EUREKA, State of Nevada

THE EAST HALF (E-1/2) OF THE NORTHWEST QUARTER (NW-1/4) OF SECTION 21, TOWNSHIP 29 NORTH, RANGE 48 EAST, M.D.B.&M.

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

Witness my hand this 21 day of JULY, 19 99.

Leland V. Gardner
LELAND V. GARDNER

Lola M. Gardner
LOLA M. GARDNER

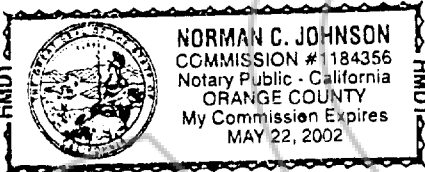
STATE OF CALIFORNIA)
COUNTY OF _____)

WHEN RECORDED MAIL TO:
LELAND V. GARDNER and LOLA M. GARDNER
P.O. BOX 1789
BUELLTON, CA 93427

On JULY 21, 1999

Personally appeared before me, a Notary Public, LELAND V. GARDNER and LOLA M. GARDNER who acknowledged that he/she/they executed the above instrument.

[Signature]
Notary Public



Notarial Seal

BOOK 328 PAGE 277
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
AmeriState Legal Plan Inc.
99 AUG 16 PM 1:16

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES \$7.00

172518

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DECLARATION OF VALUE

Instrument # 172518

Full Value of Property Interest Conveyed \$ _____
 Less Assumed Liens & Encumbrances - _____
 Taxable Value (NRS 375.010) \$ _____
 Real Property Transfer Tax Due \$ _____

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

Exemption # 8. Transfer to a trust without consideration

INDIVIDUAL

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

Lola M. Gardner
 Signature of Declarant

LOLA M. GARDNER
 Name (Please Print)

PO BOX 1789
 Address

Buellton CA 93427
 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