

RPTT: _____
APN: 005-290-06

178492

QUIT CLAIM DEED

THIS INDENTURE WITNESSES That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE
(RAYMOND CHRISMA ROXY ROUSSELO) _____ for and in
consideration of Seven hundred twenty-five Dollars (\$ 725.00) 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): ZEDA INC

_____ whose street address
is (if applicable): HC 66 IT 3 BOX 5 _____, situate in the City
of BEOWAWE _____, County of EUREKA _____, State of NEVADA _____
bounded and described as follows: (Set forth legal description)

TOWNSHIP NORTH, RANGE 49 EAST, MDB&M
Section 5NE4SE4NW4

Together with all and singular editament and appurtenances thereunto belonging or in any way appertaining to.
In Witness Whereof, I/We have/unto set my hand/our hands on August 19, 2002.

Mary Jo Castaneda
Signature of Grantor

Signature of Grantor

Mary Jo Castaneda, Eureka County Treasurer
Print or type name here

Print or type name here

STATE OF NEVADA

COUNTY OF EUREKA

This instrument was acknowledged before me on (date) August 20, 2002
By (person(s) appearing before notary public) Mary Jo Castaneda
Glady Goicoechea
Notary Public
My commission expires: 11/28/2002



GLADY GOICOECHEA
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No. 04-0320-0 - Expires (Notary Stamp) 2002

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name: Zeda Inc.
Address: HC 66 Unit 3 box 5
City/State/Zip: Beowawe, 89821

DED104

Nevada Legal Forms and Books, Inc. (702) 870-8
3020 W. Charleston Blvd.
Las Vegas, NV 89102
www.legalformsonline.com

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Zeda Inc
02 AUG 20 PM 2:44

EUREKA COUNTY NEVADA
J.N. REBALEATI, RECORDER
FILE NO.

FEES 14.00

178492

STATE OF NEADA
DECLARATIO OF VALUE

1. Assessor Parcel Niber (s)

a) 05-290-0
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 178492
Book: 349 Page: 129
Date of Recording: 8-20-07
Notes: _____

2. Type of Property:

a) <input checked="" type="checkbox"/>	Vacant L	b) <input type="checkbox"/>	Single Fam Res.
c) <input type="checkbox"/>	Condo/Twe	d) <input type="checkbox"/>	2-4 Plex
e) <input type="checkbox"/>	Apt. Bldg	f) <input type="checkbox"/>	Comm'l/Ind'l
g) <input type="checkbox"/>	Agricultu	h) <input type="checkbox"/>	Mobile Home
i) <input type="checkbox"/>	Other		

3. Total Value/Sale Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ 725
Transfer Tax Value: \$ _____
Real Property Trans Tax Due: \$ 1.36

4. If Exemption Claim:

a. Transfer Tax Exption, per NRS 375.090, Section: _____
b. Explain Reason Exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned decla and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that information provided is correct to the best of their information and belief, and can be supped by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, rr result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.1, the Buyer and Seller shall be jointly and severally liable for any additional amount ow.

Signature ZENA INC Michael Griswold Capacity Buyer
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: _____
Address: _____
City: _____
State: _____ Zip: _____

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: ZENA INC
Address: MC66 Unit 3 Box 5
City: Beowawe
State: NU Zip: 89821

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
Address: _____
City: _____ State: _____ Zip: _____

(AS A PUC RECORD THIS FORM MAY BE RECORDED)