

**QUIT CLAIM DEED**

THIS INDENTURE WITNS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE  
(THOMAS & SARAH KUIN) for and in

consideration of Seven hured fifty Dollars (\$ 750.00 ) 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 IN.

whose street address is (if applicable): HC 66 UT 3 BOX 5, situate in the City of BEOWAWE, County of EUREKA, State of NEVADA

bounded and described as follc: *(Set forth legal description)*

TOWNSHIP 3 NORTH, RANGE 48 EAST, MDB&M  
Section 20 SE4NE4NW4

Together with all and singular hditament and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We haveunto 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 acknodge before me on (date) August 20, 2002

By (person(s) appearing before notary public) Mary Jo Castaneda

Glady Goicoechea  
Notary Public  
My commission expires: 10/28/2002



RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name: Zeda Inc.  
Address: HC 66 Unit Box 5  
City/State/Zip: Beowawe NV 89821

BOOK 349 PAGE 131  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
Zeda Inc  
02 AUG 20 PM 2:48

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EUREKA COUNTY NEVADA  
M.M. REBALEATI, RECORDER  
FILE NO. FEES 14.00

BOOK 349 PAGE 131

**178494**

# STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	178494
Book:	349 Page: 131
Date of Recording:	8-20-02
Notes:	

1. Assessor Parcel Num' (s)  
 a) 05-230-36  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property:
- |  |              |                             |                 |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land  | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/>            | Condo/Twnh   | 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"/>            | Agricultural | h) <input type="checkbox"/> | Mobile Home     |
| i) <input type="checkbox"/>            | Other        |                             |                 |

3. Total Value/Sales Price of Property: \$ 750<sup>00</sup>  
 Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 6.30

4. If Exemption Claimed:  
 a. Transfer Tax Exemption, per NRS 375.090, Section: \_\_\_\_\_  
 b. Explain Reason for exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported 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, may result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.03 the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature ZEDA INC Michel Guiswold Capacity BUYER  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
(REQUIRED)

Print Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_

**BUYER (GRANTEE) INFORMATION**  
(REQUIRED)

Print Name: ZEDA INC  
 Address: HC 66 UNIT 3 BOX 5  
 City: BEOWAUNG NV  
 State: NV Zip: 89821

**COMPANY/PERSON REQUESTING RECORDING**

(REQUIRED IF NOT THE SELLER BUYER)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)