RPTT:	<u>3.25</u>	
APN:	002-051-01	

## 178498

## QUIT CLAIM DEED

THIS INDENTURE WITNS That the GRANTOR(S):	EUREKA COUNTY TREASURER, TRUSTEE
(DOROTHY CHRISTENS)	for and in
consideration of TWO THOUSA TWO HUNDRED NINET Dollar	rs (\$ 2290.84) do hereby QUIT CLAIM the right, title
and interest, if any, which GRADR may have in all that real pr	operty, the receipt of which is hereby acknowledged, to the
	whose street address
is (if applicable): 7126 GLEDE LANE	, situate in the City
of ANACORTES , County of	State ofWASHINGTON
bounded and described as folic: (Set forth legal description)	DANGU C TARMS INTO 41
All Block , CRESCENT VALLEY	RANCH & FARMS UNIT #1
Together with all and singular hditament and appurtenances	thereunto belonging or in any way appertaining to.
In Witness Whereof, I/We havereunto set my hand/our hand  Signature of Grants  Signature of Grants	Signature of Grantor
MARY JO CASTANEDA	. ) ]
Print or type name here EUKA CO. TREASURER	Print or type name here
STATE OF NEVADA	
COUNTY OF EUREKA	\
This instrument was acknowled before me on (cale)	19.15 21, 2002
By (person(s) appearing before notary public) Paux for Caston da	Q /
Barbara Backs Notary Public	BARBARA BAILEY  MOTARY PUBLIO STATE OF NEVADA Appt. Recorded in EURBAA COUNTYVatary  Stamp)
My commission expires: $0071, 2006$	My Appt. Expires October 11, 2005 No: 93-4804-8
RECORDING REQUESTED BY AND MAIL TAX S:MENT TO	THIS SPACE FOR RECORDERS USE ONLY
Name: WILLIAM G. KIRKIRICK	
Address: P.O. BOX 594  City/State/Zip: ANACORTES A 98221	BOOK 349 PAGE 134 OFFICIAL RECORDS RECORDED AT THE REPHEST OF WILLIAM & KUKPAKUK
	UZ AUG 21 PH 1: 25
DED104 Nevada Legal Forms and Books, Inc. (702) 870-8 3020 W. Charleston Bivd. Las Vegas, NV 89102	EUREKA COUNTY NEVADA M.N. REBALEATI. RECORDER FILE NO. FEE\$ /4
www.legalformerue.com 6 1998 Consult an attorney if you doubt this formess for your purpose DOK 3 4 9 PAU	

## STATE OF NEVDA DECLARATION F VALUE

	FOR RECORDERS OPTIONAL USE ONLY
. Assessor Parcel Numr (s)	Document/Instrument#: 178498
a) 2-051-01	Book: 349 Page: /34
b)	Date of Recording: 8-21-02
c)	Notes:
d)	
2. Type of Property:	
4, (2)	ngle Fam Res.
<b>4</b> ,	4 Plex omm'Vind'i
	obile Home
1) Other	
3. Total Value/Sales Fie of Property:	\$ 2, 290.84
Deed in Lieu of Forecure Only (value of p	
Transfer Tax Value:	\$
Real Property Transfeax Due:	\$ 3.25
	~ \ \ \
4. If Exemption Claims	
a. Transfer Tax Exerion, per NRS 375.09	0, Section:
b. Explain Reason Exemption:	
E. D. WI Interest: Daystone being transf	ferred: %
5. Partial Interest: Pentage being transf	lelled: V
The undersigned declarand acknowledges	under penalty of perjury, pursuant to NRS 375.060
THE Undersigned decial and dolars models	d is correct to the best of their information and
and INKS 375.110, that inhomitation provides	if called upon to substantiate the information
belief, and can be supped by documentation	e of any claimed exemption, or other determination
provided nerein. Furtheore, the disallowance	3.40% of the tax due plus interest at 1% per month
of additional tax due, mresult in a penalty of	10% of the tax due plus interest at 1% per month.
- upo over the Down and Co	ller shall be jointly and severally liable for any
	Hel Stratt be jointly and Severally habite for any
additional amount owr	
Signature Darasanda	Capacity Jeller
Signature	Capacity
0.9	
SELLED (GRANTO INFORMATION	BUYER (GRANTEE) INFORMATION
SELLER (GRANTO INFORMATION	BUYER (GRANTEE) INFORMATION (REQUIRED)
(BEUTIBED)	(REQUIRED)
Print Name: EUIX. (8. TILKSWAY	(REQUIRED) Print Name:
Print Name: EUIZ. (1. TILRSWAY  Address: Po 677	(REQUIRED) Print Name: Address:
Print Name: EUIZ. (3. TILLSWILLY Address: Po 611 City: Faire	(REQUIRED) Print Name: Address: City:
Print Name: EUIZ. (1. TILRSWAY  Address: Po 677	(REQUIRED) Print Name: Address:
Print Name: EUIL Co. TILLSWAY  Address: Po 611  City: Euice State: Zip: 99316	(REQUIRED) Print Name: Address: City: State: Zip:
Print Name: EUIZ. (1. TILISUILY Address: Po 677 City: Eaix. State: Zip: 99316  COMPANY/PERSC REQUESTING F	(REQUIRED) Print Name: Address: City: State: Zip:
Print Name: EUIZ. Cs. TILLSUNZY  Address: Po 611  City: Zip: 99316  COMPANY/PERSC REQUESTING F  (REQUIRED IF NOT THE SER OR BUYER)	(REQUIRED) Print Name: Address: City: State: Zip:
Print Name: EUIZ. (1. TILISUILY Address: Po 677 City: Eaix. State: Zip: 99316  COMPANY/PERSC REQUESTING F	(REQUIRED) Print Name: Address: City: State: Zip:
Print Name: EUIR. Co. TURSUMAN Address: Po 617 City: Euir Zip: 99316  COMPANY/PERSC REQUESTING FOR (REQUIRED IF NOT THE SER OR BUYER)	(REQUIRED) Print Name: Address: City: State: Zip: EECORDING Escrow #
Print Name: EUIZ. (3. TILLSWILLY Address: Po 611 City: Faix State: Zip: 19316  COMPANY/PERSC REQUESTING F (REQUIRED IF NOT THE SER OR BUYER) Print Name:	(REQUIRED) Print Name: Address: City: State: Zip:

(AS A PUIC RECORD THIS FORM MAY BE RECORDED)