

RPTT: 1.30
APN: 005-430-03

178513

QUIT CLAIM DEED

THIS INDENTURE WITNESSES That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE
(RUTH MARY LARSO) for and in

consideration of SEVEN HUNDRED FIFTY Dollars (\$ 750.) 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): DAVID G. ABCOCK

whose street address is (if applicable): HC 66 UT 4 #12, situate in the City of BEOWAWE, County of EUREKA, State of NEVADA

bounded and described as follows: (Set forth legal description)

TOWNSHIP : NORTH, RANGE 48 EAST, MDB&M

Section : SW4NE4SW4

Together with all and singular right, title and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We have hereunto 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 19, 2002

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

Stacy Goicoechea
Notary Public
My commission expires: 1/28/2002

STACY GOICOECHEA
Notary Public - State of Nevada
Appointment Recorded in (County) Eureka County
No. 04-0229-8 - Expires October 28, 2002

RECORDING REQUESTED BY AND MAIL TAX PAYMENT TO

Name: David G. Babcock
Address: HC 66 UNIT #12
City/State/Zip: Beowawe, NV 89821

THIS SPACE FOR RECORDERS USE ONLY

BOOK 349 PAGE 152
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
David G. Babcock
02 AUG 23 PM 2:45

DED104

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EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. 178513 FEES/4⁰⁰

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STATE OF NEADA DECLARATIO OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>178513</u>
Book:	<u>349</u> Page: <u>152</u>
Date of Recording:	<u>8-23-02</u>
Notes:	_____

1. Assessor Parcel Niber (s)

- a) 5-430-03
- b) _____
- c) _____
- d) _____

2. Type of Property:

- | | | | |
|--|------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant L | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Tise | 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"/> | Agricult. | h) <input type="checkbox"/> | Mobile Home |
| l) <input type="checkbox"/> | Other | | |

3. Total Value/Sale Price of Property:

Deed in Lieu of Forosure Only (value of property) \$ 750⁰⁰

Transfer Tax Value \$ _____

Real Property Trans Tax Due: \$ 1.30

4. If Exemption Claimed:

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

5. Partial Interest: Percentage being transferred: _____ %

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

Pursuant to NRS 3750, the Buyer and Seller shall be jointly and severally liable for any additional amount od.

Signature *M. J. Stansfield* Capacity *Seller*

Signature _____ Capacity _____

SELLER (GRANTR) INFORMATION

(REQUIRED)

Print Name: Eurel County Treasurer

Address: P O x 677

City: Eurel, NV 89316

State: _____ Zip: _____

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: _____

Address: _____

City: _____

State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)