

QUIT CLAIM DEED

THIS INDENTURE WITNS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE
(LEWIS COLLINS) for and in
consideration of Seven hundred twenty-five Dollars (\$ 725.00) do hereby QUIT CLAIM the right, title
and interest, if any, which GRANR may have in all that real property, the receipt of which is hereby acknowledged, to the
GRANTEE(S): JUDITH CHAYER LYNN

whose street address
is (if applicable): 1010 SKYNE, situate in the City
of BATTLE MOUNTAIN, County of _____, State of NEVADA
bounded and described as follo (Set forth legal description)

Lot 4, Bld 7, CRESCENT VALLEY RANCH & FARMS UNIT #4

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 acknowledged before me on (date) _____

By (person(s) appearing before notary/public) _____

Notary Public
My commission expires: _____

(Notary Stamp)

RECORDING REQUESTED BY AND MAIL TAX STMENT TO

Name: Judith C. May-Lynn
Address: 1010 Skyline
City/State/Zip: Battle Mntain, NV 89821

THIS SPACE FOR RECORDERS USE ONLY

BOOK 349 PAGE 299
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka Co Treasurer
02 SEP -3 PM 3:26

EUREKA COUNTY NEVADA
J.N. REBALEATI, RECORDER
FILE NO. _____ FEES 14.00

DED104

Nevada Legal Forms and Books, Inc. (702) 870-8
3020 W. Charleston Blvd.
Las Vegas, NV 89102
www.legalformsusa.com
© 1998 Consult an attorney if you doubt this forms use for your purpose.

BOOK 349 PAGE 299

178582

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

- a) 003-094-1
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 178582
Book: 349 Page: 299
Date of Recording: 9-3-02
Notes: _____

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"/> | Agricultu. | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ 725.00
Transfer Tax Value: \$ _____
Real Property Trans Tax Due: \$ 1.30

4. If Exemption Claimed:

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

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declare 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, will result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.0, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Capacity Seller
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Eureka County Treasurer
Address: P.O. Box 677
City: Eureka, 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)