

QUIT CLAIM DEED

THIS INDENTURE WITNS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE

(AMIGOS ETAURANTS)

for and in

consideration of ~~ONE THOUSAND SEVEN EIGHTY~~ ^{THREE & 9900} Dollars (\$1,783.99) 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): R L L I., a California Corporation

ROBERT DIMMICK

whose street address

is (if applicable): P.O. Box 2209

of Newport Beach, County of _____, State of California 92659

bounded and described as follo (Set forth legal description)

TOWNSH 30 NORTH, RANGE 49 EAST, MDB&M

Section 25: W2W2NW4

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 Castane
Signature of Grantor

Signature of Grantor

MARY JO CASTANE

Print or type name here EURE COUNTY TREASURER

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 Castane

Gladys Goicoechea
Notary Public

My commission expires: 10/8/2002



GLADY GOICOECHEA
Notary Public - ~~State of Nevada~~
Appointment Recorded in Eureka County
No: 94-0329-8 - Expires October 28, 2002

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name: R L L INC., a California Corp.

Address: P.O. BOX 220

City/State/Zip: NEWPORT BCH, CA. 92659

c/o ROBERT O. IMMICK
P.O. BOX 09
NEWPORT BCH, CA. 92659

DED104

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Robert O Dimmick
02 SEP -3 PM 3:49

EUREKA COUNTY NEVADA
K.N. REBALEATI, RECORDER
FILE NO. FEES 14⁰⁰

178583

STATE OF NEVDA
DECLARATION OF VALUE

1. Assessor Parcel Number (s)

a) 05 320 01
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 178583
Book: 349 Page: 300
Date of Recording: 9-3-02
Notes: _____

2. Type of Property:

a) <input checked="" type="checkbox"/>	Vacant Land	b) <input type="checkbox"/>	Single Fam Res.
c) <input type="checkbox"/>	Condo/Twn	d) <input type="checkbox"/>	2-4 Plex
e) <input type="checkbox"/>	Apt. Bldg.	f) <input type="checkbox"/>	Comm'/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:

\$ 1783.99

Deed in Lieu of Foreclosure Only (value of property) \$ _____

Transfer Tax Value: \$ _____

Real Property Transfer Tax Due: \$ 2.60

4. If Exemption Claim:

a. Transfer Tax Exemption, per NRS 375.090, Section: _____

b. Explain Reason for exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declarant 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 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 375.0, 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 B 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)