RPTT:	2.66	
APN	005-010-08	

## 178586

## **QUIT CLAIM DEED**

THIS INDENTURE WITHS That the GRANTOR(S):	EUREKA COUNTY TREASURER, TRUSTEE
(HADASSAH, INC. ERTRUDE HUMPRIES)	for and in
consideration of SIXTEEN HUNED & 00/100 Doll	ars (\$ 1,600.00 ) do hereby QUIT CLAIM the right, title
and interest, if any, which GRANR may have in all that real p	property, the receipt of which is hereby acknowledged, to the
GRANTEE(S): R L L, IN, a California Corpor	cation
ROBERT O. MMICK	whose street address
is (if applicable): P.O. BOX 19	, situate in the City
of Newport Beach , County of	, State of <u>California 92659</u>
bounded and described as follo: (Set forth legal description)	\ \
	\ \
TOWIP 31 NORTH, RANGE 4	
Secon 5: W2 Lot 1 (W2NE	4NE4)
Together with all and singular helitament and appurtenance	es thereunto belonging or in any way appertaining to.
In Witness Whereof, J/We have reunto set my hand/our har	
m.(i)	
Signature of Conference	Signature of Grantor
Signature of Grantof	Signature of Grantor
MARY JO CASTANEDA  Print or type name here EURŁ CO. TREASURER	Print or type name here
Time of type hame nere boxe oo. TREADORDE	Anna or type dame here
STATE OF NEVADA	
COUNTY OF EUREKA	
This instrument was acknowled before me on [1616]	Hugust 19, 2002.
By (operants) appearing before polary public)  (1) By (operants) appearing before polary public)	35 Ameda
$\mathcal{H}$ , $\mathcal{H}$ $\mathcal{H}$	1,000,000
May Dica head	GLADY GOICOECHEA
Notary Public / 128 / 3002	Notary Professor State of Nevada Appointment Recorded in Euroka County
	No. 84-0329-8 - Expires October 26, 2002
RECORDING REQUESTED BY AND MAIL TAX STAENT TO	THIS SPACE FOR RECORDERS USE ONLY
Name: R L L. INC., a lifornia Corp.	
Address: P.O. Box 2209	BOOK 349 PAGE 303
City/State/Zip: Newport Bes. CA. 92659	OFFICIAL RECORDS
c/oROBERT O. MMICK	Robert O Dimmick 02 SEP-3 PH 3:52
P.O. BOX 39 NEWPORT BIH, CA. 92659	
DED104	EUNERA GUUNTY HEVADA M.N. REBALEATI. RECORDER, 400
Nevada Legal Forms and Books, Inc. (702) 870-89 3020 W. Charleston Bivd.	M.M. REBALEAN, RECURDER FEES 4 - 178586
Las Vegas, NV 89102  www.legalformene.com  6.1908 Consult as alternay if you doubt this forms is for your purpose.	ROOK 3 4 9 PAGE 3 O 3

## STATE OF NEVDA DECLARATIO OF VALUE

		• 1	IDERS OF HUNAL USE UNLT	
. Assessor Parce			nstrument#: /78586	
a) 5-0	10-8	Book:	349 Page: 30.3	
b)		Date of Reco	ording: <u>9-3-02</u>	
c)	<u></u> -	Notes:		
d)				
			······································	
2. Type of Propert	y:	•		
-/ ()	ant La b) 🔲	Single Fam Res.		
<u>-                                    </u>	do/Twe d)	2-4 Plex	^	
<b>–</b>	Bldg f) C	Comm'VInd'I Mobile Home	/\	
g) [ Agri Oth/		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	( )	
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3 Total Value/S	alestice of Property	<i>ι</i> : \$ // <sub>~</sub> <i>α</i> /	1.00	
	Forosure Only (value	of property) \$	7.00	<del></del>
		7: \$ /600 s of property) \$		<del>-</del>
Transfer Tax Va		3		
Real Property T	rans l'ax Due:	\$ 2.	60	<del></del>
	No. tt.			\
4. If Exemption C				\
	ax Exption, per NRS 37	5.090, Section:		<u></u>
b. Explain Re	ason Exemption:			
•				<del>\ \ \</del>
			04	
<ol><li>Partial Interes</li></ol>	t: Pientage being tra	ansterred:	%	1
			. \ .\	
The undersigned of	lecla and acknowledg	les, under penalty of per	jury, pursuant to NRS 375	5.060
and NRS 375.110,	thale information pro-	vided is correct to the be	est of their information and	i
belief, and can be	supped by documenta	ation if called upon to suf	bstantiate the information	
provided herein. F	urthnore, the disallow	rance of any claimed exe	emption, or other determin	nation
of additional tax du	ue ir result in a penali	ty of 10% of the tax due	plus interest at 1% per me	onth.
Of additional tast as				
Pursuant to NRS	3750, the Buyer and	i Seller shall be jointly	and severally liable for	anv
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additional amout	it ou.		· · · · · · · · · · · · · · · · · · ·	
Signature_//	wastance.		ipacity, Seffer	
Signature	7-11	Ca	apacity	
CELLED IC DA	NTO INFORMATION	ON BUYER (G	RANTEE) INFORMAT	TON .
			QUIRED)	1011
(REQU	ireklounty Treasur		.4011/25/	
	O £ 677	Address:		
City: I	Eure, NV 89316	City:		
State:	Zip:	State:	Zip:	
COMPANY/PE	RSI REQUESTIN	G RECORDING		
	THE SER OR BUYER)			
•	tus sev ov potevi		Escrow#	
Print Name:	/A.			
	-			
Address:		Chahai		
Address:	$\rightarrow \rightarrow$	State:	Zip:	

(AS A PLIC RECORD THIS FORM MAY BE RECORDED)