

# QUIT CLAIM DEED

THIS INDENTURE WITNS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE  
(R.L. CONAY & D.V. SHELTON) for and in  
consideration of ONE THOUSAND NINETY-FOUR Dollars (\$1,094.13) do hereby QUIT CLAIM the right, title  
and interest, if any, which GRANOR 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 ODIMMICK whose street address  
is (if applicable): P.O. BOX 2209, situate in the City  
of Newport Beach, County of \_\_\_\_\_, State of California 92659  
bounded and described as follows: (Set forth legal description)

TOWNSHIP 29 NORTH, RANGE 48 EAST MDB&M

Secti 33; E2SW4SW4

Together with all and singular hereditament 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  
Print or type name here EURE CO. 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 Castaneda

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



RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO  
Name: R L L, INC., a California Corp.  
Address: P.O. BOX 2209  
City/State/Zip: NEWPORT BEH, CA 92659  
c/o ROBERT O. DMICK  
P.O. BOX 29  
NEWPORT BEH, CA. 92659

THIS SPACE FOR RECORDERS USE ONLY  
BOOK 349 PAGE 305  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
Robert O Dimmick  
02 SEP -3 PM 3:54  
EUREKA COUNTY NEVADA  
M.M. REBALEATI, RECORDER  
FILE NO. 178588 FEES 14.00  
BOOK 349 PAGE 305

DED104  
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# STATE OF NEVDA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	178588
Book:	349
Page:	305
Date of Recording:	9-3-02
Notes:	

1. Assessor Parcel Number (s)  
 a) 5-470-21  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property:

a) <input checked="" type="checkbox"/>	Vacant Lan	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'l/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: \$ 1094.13  
 Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 1.30

4. If Exemption Claimed  
 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 Margaret [Signature] Capacity Seller  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

### SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Eureka County Treasurer  
 Address: P O Box 77  
 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)