

RPTT: 3.90
APN: 001-012-1

178866

QUIT CLAIM DEED

THIS INDENTURE WITNS That the GRANTOR(S): SHARLENE S. VERNES & THEODORE I. VERNES

for and in consideration of THREE THOUSAND & NO/100 Dollars (\$ 3000.00) 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): MARTORY AASTORINO

whose street address is (if applicable): 450 DIABLANE, situate in the City of EUREKA, County of EUREKA, State of NEVADA

bounded and described as follo (Set forth legal description)

SE 1/4 OF NE 1/4 (SEC. 14 T. 19. N R 53 E MDM, M LOT A. 7
EUREKA TOWNE, EUREKA COUNTY, NEVADA

ASSESORS PARL. NO. 001-012-21
DISTRICT 1.0

550 NOB HILL AVE.
EUREKA, NEVADA

Together with all and singular hditament and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We have unto set my hand/our hands on _____

Sharlene S. Vernes
Signature of Grantor

SHARLENE S. VERNES
Print or type name here

Theodore I. Vernes
Signature of Grantor

THEODORE I. VERNES
Print or type name here

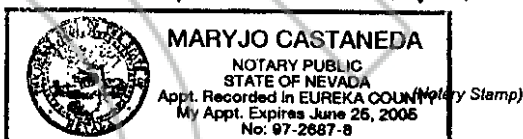
STATE OF NEVADA

COUNTY OF EUREKA

This instrument was acknowledged before me on (date) October 8, 2002

By (person(s) appearing before notary public) SHARLENE S. VERNES & THEODORE I. VERNES

Maryjo Castaneda
Notary Public
My commission expires: 6-5-05



RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: MARTORY A. PASTORINO
Address: P.O. Box 56
City/State/Zip: EUREKA, NEVADA 89316

THIS SPACE FOR RECORDERS USE ONLY

BOOK 351 PAGE 011
OFFICIAL RECORDS
RECORDED AT THE OFFICE OF
Martory A. Pastorino
02 OCT -8 PM 1:10

EUREKA COUNTY, NEVADA
H.M. REBALEATI, RECORDER
FILE NO.

178866

FEES 14.00

DED104

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STATE OF NEVDA
DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 001-012-21
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 178866
Book: 351 Page: 011
Date of Recording: 10/8/02
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'l/Ind'l |
| g) <input type="checkbox"/> | Agriculture | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property:

\$ 3,000.00

Deed in Lieu of Foreclosure Only (value of property)

\$ _____

Transfer Tax Value:

\$ _____

Real Property Transfer Tax Due:

\$ 3.90

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 Mary A. Pastorino Capacity _____

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: _____
Address: _____
City: _____
State: _____ Zip: _____

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: MARY A. PASTORINO
Address: P.O. BOX 36
City: EUREKA
State: NV Zip: 89316

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)