

RPTT: \$13.00
APN: 07-380-9

QUIT CLAIM DEED

THIS INDENTURE WITNES That the GRANTOR(S): Ricky L Goff and Sherrie J Goff
and Robert Stephenson for and in
consideration of 710.00 Ten Dollars (\$ 10.00) 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): TERRY Anderson
PO Box 87 whose street address
is (if applicable): _____, situate in the City
of EUREKA, County of Eureka, State of Nevada
bounded and described as follows: (set forth legal description)

Lot 1 of lot No. of Parcel NO. 2 Gov. Lot 16 Sec 29T20N53E M
D.B. + M.

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

In Witness Whereof, I/We have unto set my hand/our hands on 11-15-02

Signature of Grantor

Signature of Grantor

RICKY L. GOFF

Sherrie J. Goff

Print or type name here

Print or type name here

Robert Stephenson

Robert Stephenson

STATE OF Nevada

COUNTY OF clark

This instrument was acknowledged before me on (date) 16 November 2002

By (person(s) appearing before notary public) Ricky L. Goff

Lydia Moyer

Notary Public

My commission expires: January 5, 2004



Notary Public-State Of Nevada
COUNTY OF CLARK
LYDIA MOYER
My Appointment Expires
January 5, 2004

No 00-60230-1

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name: Terry Anderson

Address: PO Box 87

City/State/Zip: EUREKA NV 89316

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Robert Stephenson
02 NOV 25 AM 9:41

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. _____ FEES 15.00

DED104

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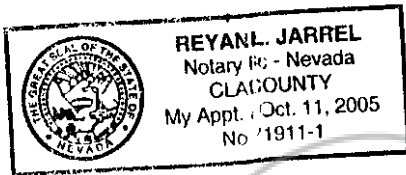
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179800

ACKNOWLEDGMENT

State of NEVADA
County of CLARK

On this 15 day of November, 2002, Sherrie J. Goff personally appeared before me,
____ who is personally known to me,
☒ whose identity I verified on the basis of NVDL # 1000678579,
____ whose identity I verified on the oath/affirmation of _____,
a credible witness,
to be the signer of the foregoing document, and he/she acknowledged that he/she signed it.



Reyanna L. Jarrel
Notary Public
My Commission Expires: Oct. 11/05

Attribution Clause: This Certificate prepared for, and exclusively belongs to, the accompanying document entitled

Quit claim deed which consists of 1 page(s) and is dated 11/15/02 (not dated)
If this Certificate is appropriated by document other than the one described herein, it shall be deemed null and void.

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JAN 18 2002 15:26

702 397 8998

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BOOK 355 PAGE 002

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Numr (s)

- a) 07-380-5
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 179800
Book: 355 Page: 201
Date of Recording: 11-25-02
Notes: _____

2. Type of Property:

- | | | | |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnh | 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 Pte of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ 10,000

Transfer Tax Value: \$ _____

Real Property Transfer Tax Due: \$ 13.00

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 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, may result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.060 the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature: Robert Stephenson Capacity: Seller
Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Robert Stephenson
Address: PO Box 2
City: Eureka
State: NV Zip: 89316

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)