

RPTT. 1.30
APN 003-044-04

181443

QUIT CLAIM DEED

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

(John C And Richard C Kula)

for and in consideration of

One Thousand Dollars and 00/100 Dollars (\$ 1000 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)

William and Peggy Kirkpatrick, Husband and Wife as joint tenants with rights of survivorship whose street address is (if applicable) P O Box 594, situate in the City of Anacortes, County of _____, State of Washington.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:
(Set forth legal description)

LOT 1, BLOCK 16, CRESCENT VALLEY RANCH AND FARMS UNIT #3

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 March 19, 2003.

Frances E. Gale
Signature of Grantor
Frances E. Gale, Eureka County Treasurer

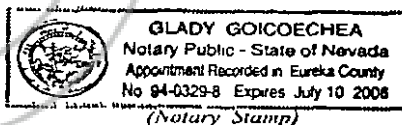
STATE OF NEVADA }
COUNTY OF EUREKA }

This instrument was acknowledged before me on (date) March 19, 2003

By (person(s) appearing before notary public) James E. Gale

Glady Goicoechea
Notary Public

My Commission expires: 7-10-2006



RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

THIS SPACE FOR RECORDERS USE ONLY

Name William and Peggy Kirkpatrick

Address P O Box 594

City/State/Zip Anacortes, WA 98221

BOOK 359 PAGE 334
OFFICIAL RECORD

William & Peggy Kirkpatrick
03 MAR 20 11:20

BOOK 359 PAGE 334

181443

NO D
LORD
FEES 14.00

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 03-044-04
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument# 181443
Book 359 Page 334
Date of Recording 3-20-03
Notes _____

2. Type of Property:

- | | | | |
|--|--------------|-----------------------------|-----------------|
| a) <input checked="" type="checkbox"/> | Vacant Land | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt Bldg | f) <input type="checkbox"/> | Comm/Vindl |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ 1000⁰⁰
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 declares 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 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Frances Gale Capacity Treasurer
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Frances Gale
Address: P O Box 667
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)