RPTT APN:	003-095-07
-	

## 181446 QUIT CLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR	(S) FURFKA COUNTY TREASURER, TRUSTEE
(Sarah I ee Radeliffe)	for and in consideration of
One thousand four hundred fifty-four and 04/100 Doll	ars (\$ 1454 04 ) do hereby QUIT CLAIM the right, title
and interest, if any, which GRANTOR may have in all that re	al property, the receipt of which is hereby acknowledged,
to the GRANTEE(S):	
Judith Mayer-Lynn	whose street address is
(if applicable) 1010 Skyline	, situate in the City
of Battle Mountain, County of L	ander , State of Nevada .
All that certain property in the County of Eureka, State of Ne	vada bounded and described as follows
(Set forth legal description)	
LOT 7, BLOCK 10, CRESCENT VALLEY I	RANCH AND FARMS UNIT #4
,	
Together with all and singular hereditament and appeurtenant	ces thereunto belonging or in any way appertaining to.
In Witness Whereof, I/We have hereunto set my hand/our han	
Frances E. Gole	
Signature of Grantor Frances E. Gale, Eureka County Treasurer	
STATE OF NEVADA ) COUNTY OF EUREKA	
This instrument was acknowledged before me on (data,	March 19.2003
By (porson(s) appearing be (soft notary public) Thuncles	Gale
9001 000	
Deady Ducse Chea	GLADY GOICOECHEA  Notary Public - State of Nevada
My Commission expires 7-10-2006	Appointment Recorded in Eureka County No 94-0329-8 - Expires July 10, 2006
RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO	(Notary Stamp) THIS SPACE FOR RECORDERS USE ONLY
RECORDING REQUESTED BY AND MAIL TAX STATE VIEW TO	
Name Judith Mayer-Lynn	Judith Mayer-Sym-
Address: 1010 Skyline	O in marce - Sum
\ \	031173.20 71111:50
City/State/Zip Battle Mountain, NV 89820	0011.00
200/2 = 1	11 TO LELS 400
B00K359 PAGE3:	37 <b>181446</b>

## STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s) a) 1. 3 - 175 - 17 b)	4 A	rcel Numberie	1	l	FOR RECORDERS OF	40. 4 4	1
b)   Oate of Recording   3 - 20 - 03	" VA-VO	(3) (3) (3) (5) (5)	7	i		Page 227	<del></del>
e) d)		<del></del>	-	j		3-20-03	++
2. Type of Property:    2. Type of Property:   2. Type of Property:   3. Type of Property:   3. Type of Property:   4. Lype of Property:   5.				ì		<u> </u>	1-+
2. Type of Property:			- 	ł			1
Signature  Vacant Land  Signature  Capacity  Print Name:  Frances Gale  Agrecules or Resultant  Signature  Company/PERSON REQUESTING RECORDING  (REQUIRED)  Print Name:  Pursual Property Other  Signature  Company/PERSON REQUESTING RECORDING (REQUIRED)  Resultant Name:  Company/Person Requirem  Signature  Company/Person Requirem  Escrow#  Address:  Print Name:  Print Name:  Fint Name:  Fin	·			l			
Deed in Lieu of Foreclosure Only (value of property) Transfer Tax Value: Real Property Transfer Tax Due:  5		Vacant Land Condo/Twnhse Apt, Bidg Agnoultural	• <u> </u>	2-4 Plex CommVind1	_		7
a Transfer Tax Exemption, per NRS 375.090, Section. b Explain Reason for Exemption.  5 Partial Interest: Percentage being transferred.  6 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  Capacity  SELLER (GRANTOR) INFORMATION  BUYER (GRANTEE) INFORMATION  (REQUIRED)  Print Name:  Frances Gale  Print Name:  Address:  D D Box 667  Address:  COMPANY/PERSON REQUESTING RECORDING  (REQUIRED) F NOT THE SELLER OR BUYER;  Print Name:  Address:  Escrow#	Deed in Lieu Transfer Tax	of Foreclosure ( Value:	Only (value of		\$ . \$		
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 Capacity Treasurer  Signature Capacity  SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION  (REQUIRED) (REQUIRED)  Print Name: Frances Gale Print Name:  Address: P 0 Box 667 Address:  City: Eureka, NV 89316 City:  State Zip. State. Zip  COMPANY/PERSON REQUESTING RECORDING  (REQUIRED IF NOT THE SELLER OR BUYER)  Print Name:  Address:  Escrow#	a Transfer	Tax Exemption, p	per NRS 375.09	90, Section.			
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additional amount owed.  Signature Capacity Treasurer  Signature Capacity  SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION  (REQUIRED) (REQUIRED)  Print Name: Frances Gale Print Name:  Address: P 0 Box 667 Address:  City: Eureka, NV 89316 City:  State Zip. State. Zip  COMPANY/PERSON REQUESTING RECORDING  (REQUIRED IF NOT THE SELLER OR BUYER)  Print Name: Escrow#  Address:	and NRS 375.11 belief, and can b provided herein, of additional tax	0, that the inform e supported by o Furthermore, the due, may result	nation provide focumentation ne disallowand in a penalty of	ed is correct to the correct of any class of any class from the correct of the co	to the best of their on to substantiate med exemption, o tax due plus inter-	r information and the information or other determination est at 1% per month.	1
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(REQUIRED IF NOT THE SELLER OR BUYER) Print Name: Escrow# Address:	STATE	Zip.		State.	<del>*************************************</del>		
Print Name: Escrow# Address:				ECORDING	<u> </u>		
Address:		THE SELLER OR BU	YER)				
	76.				Escrow	#	
City: Zip.	L No.		/	<u></u>	<del></del>		
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(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)