

RPTT 0  
APN 02-023-26

**181994**

# QUITCLAIM DEED

THIS INDENTURE WITNESSETH that the GRANTOR(S): WILLIAM TILTON, JR. & KIMBERLY TILTON  
husband & wife  
for and in consideration of Ten and no/100 Dollars (\$ 10.00 )  
do hereby QUITCLAIM 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): DAVID E. MASON & DEBBIE L. MASON  
husband & wife as joint tenants with right of survivorship.  
whose street address is (if applicable) 5084 Tenabo Avenue  
situate in the City of Cresce Valley, County of Eureka, State of Nevada bounded  
and described as follows: *(Set forth legal description)*

CRESCE VALLEY RANCH & FARMS UNIT #1  
LOT 16 BLOCK 4

Together with all and singular appurtenances thereunto belonging or in any way appertaining to.  
In Witness Whereof, I/We have hereto set my hand/our hands on 3 day of June, 2003.

*William Tilton, Jr.*  
Signature of Grantor  
WILLIAM TILTON, JR.  
Print or Type Name Here

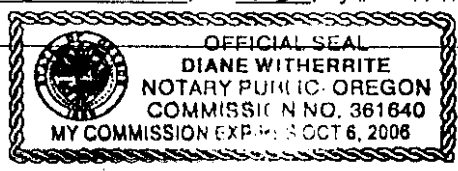
*Kimberly Tilton*  
Signature of Grantor  
KIMBERLY TILTON  
Print or Type Name Here

STATE OF NEVADA OR )  
COUNTY OF Wallowa )

This instrument was acknowledged before me on 3 day of June, 2003, by (person(s) appearing  
before notary public) Diane Witherrite

*Diane Witherrite*  
Notary Public  
My commission expires: 10/06

(Notary Stamp)



RECORDING REQUESTED BY AND MAIL TAX STATE TO  
Name: David E. & Debb L. Mason  
Address: P.O. Box 21100  
City/State/Zip: Crescent Valley, NV 89821

THIS SPACE FOR RECORDERS USE ONLY

BOOK 362 PAGE 227  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
David E. Mason  
2003 JUN 13 AM 9:48  
EUREKA COUNTY NEVADA  
M.N. REBALEATI, RECORDER  
FILE NO. FEES 14.00

# STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	181994
Book:	362 Page: 227
Date of Recording:	6-13-03
Notes:	

1. Assessor Parcel Num: (s)  
 a) 02-023  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

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 Pr of Property: \$ 4,000  
 Deed in Lieu of Foreckre Only (value of property) \$ 4,000  
 Transfer Tax Value: \$ 0  
 Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:  
 a. Transfer Tax Exemin, 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 David E. Mason Capacity \_\_\_\_\_  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) FORMATION** (REQUIRED)      **BUYER (GRANTEE) INFORMATION** (REQUIRED)

Print Name: _____	Print Name: <u>DAVID E. MASON</u>
Address: _____	Address: <u>P.O. Box 211001</u>
City: _____	City: <u>CRESCENT VALLEY</u>
State: _____	State: <u>NV.</u> Zip: <u>89821</u>

**COMPANY/PERSON REQUESTING RECORDING**  
 (REQUIRED IF NOT THE SELLER BUYER)

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_