## **QUIT CAIM DEED**

QUIT CAIM DEED	BOOK 366 PAGE 020 OFFICIAL RECORDS RECORDED AT THE REGUEST OF
APN: <u>005-690-15</u>	Hart Stamily Strust 2003 SEP 30 AH 8: 21
RECORDING REQUESTED BY AND L TAX STATEMENT TO	EUREKA COUNTY NEVADA M.H. REBALEATI, RECORDER FILERO. FEES 14.00
Name: <u>HART FAMILY 'UST</u> Address: <u>3902 275<sup>TH</sup> STIET W</u> City/State/Zip: <u>NORTHFLD</u> , <u>MN 55057</u>	182548
THIS INDENTURWITNESS That the GRANTOR(S)	
TREATMENT TO THE PROPERTY OF T	r and in consideration of
FIVE THOUSAND SEIUNDRED AND 00/100 Dol	1 1
CLAIM the right, title and rest, if any, which GRANTOR(S)	/ /
the receipt of which is here acknowledged, to the GRANTEE(	S): HART FAMILY TRUST  whose address
is (if applicable):902 275 <sup>TH</sup> ST. W.	, situate in the
	State of MINNESOTA
All that certain property in County of Eureka, State of Nevad	a bounded and described as follows:
(Set forth legal descriptio;	
TOWNSHIP 30 PRTH, RANGE 50 EAST, MDB&	<u>km</u>
SECTION 5: SWW4	\
Together with all and singr hereditament and appeurtenances	thereunto belonging or in any way
appertaining to. In Witney hereof, I/We have hereunto set my	y hand/our hands on _
SEPT. 29, 2003  Signature of Grantor Frances E. Gale, Eureka Cnty Treasurer	
STATE OF NEVADA	
COUNTY OF EUREKA  This instrument wacknowledged before me on (date) _  By (person(s) appearing before my public)	E. Gall
Notary Public My Commission expires: 1/3/07	KIMBERLY L. TODD  Notary Public - State of Nevada  Appointment Recorded in Fyreka County  No: 03-79670-8 - Expires January 3, 2007

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## STATE OF NEVDA DECLARATION F VALUE

	FOR RECORDERS OF HONAL USE ONLY
1. Assessor Parcel Numr (s)	Document/Instrument#: /82548
a) 005-690-15	Book: 366 Page: 020
· b)	Date of Recording: 9/30/03
c)	Notes:
d)	
2. Type of Property:	
	ngle Fam Res. 4 Plex
• • • • • • • • • • • • • • • • • • • •	Trex
	obile Home
l) COther	
n Takal Malua (Calas Da of Dranasti)	55/00
3. Total Value/Sales Pn of Property:	50600
Deed in Lieu of Forectire Only (value of p	
Transfer Tax Value:	\$ 1780
Real Property Transfer ( Due:	\$ 780
4. If Exemption Claime	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
a. Transfer Tax Exeron, per NRS 375.090	Section:
b. Explain Reason for emption:	
) margining ( (amount fall only and )	\ \ \ /
5. Partial Interest: Perctage being transfe	erred:%
of additional tax due, may ult in a penalty of 1 Pursuant to NRS 375.03the Buyer and Selle	
additional amount owed	/ /
Signature trans Lab	Capacity_ Treasurer
Signature	Capacity
SELLER (GRANTOR) FORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: Frances le	Print Name:
Address: P O Box 7	Address:
City: Eureka, 89316	City:
State:	State: Zip:
COMPANY/PERSON QUESTING RE	CORDING
(REQUIRED IF NOT THE SELLER BUYER)	<u> </u>
Print Name:	Escrow#
Address:	
	tate: Zip;
Oity.	enter Sulph