

# QUIT CLAIM DEED

APN: 003-192-04

BOOK 366 PAGE 043  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
Joseph Zilfi Jr  
2003 SEP 30 AM 8:48  
EUREKA COUNTY NEVADA  
M.H. REBALEATI, RECORDER  
FILE NO. FEES 14.00

RECORDING REQUESTED BY AND A TAX STATEMENT TO

Name: JOSEPH ZILFI, JR.  
Address: P.O. BOX 1712  
City/State/Zip: FLAGSTAFF, AZ 86002

**182571**

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY  
TREASURER, TRUSTEE (Robert A. Jones) for and in consideration of  
ONE THOUSAND ONE HUNDRED EIGHTY EIGHT AND 79/100 Dollars (\$1188.79) do  
hereby QUIT CLAIM the right, title and interest, if any, which GRANTOR(S) may have in all that  
real property, the receipt of which is hereby acknowledged, to the GRANTEE(S):

JOSEPH ZILFI, JR. whose address is (if applicable): P.O. BOX 1712,  
situate in the City of FLAGSTAFF, County of \_\_\_\_\_, State of ARIZONA.

All that certain property in County of Eureka, State of Nevada bounded and described as follows:

*(Set forth legal description)*

**LOTS 37 & 38, NEVELCO INC. UNIT #1**

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 \_

SEPT. 29, 2003.

Frances E. Gale


Signature of Grantor  
Frances E. Gale, Eureka City Treasurer

STATE OF NEVADA     )  
  )  
COUNTY OF EUREKA    )

This instrument was acknowledged before me on (date) 9/29/03  
By (person(s) appearing before me public) Frances E. Gale

Kimberly L. Todd  
Notary Public

My Commission expires: 1/3/07

 KIMBERLY L. TODD  
Notary Public - State of Nevada  
Appointment Recorded in Eureka County  
No: 03-79670-8 - Expires January 3, 2007

**182571**

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# STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	182571
Book:	366
Page:	043
Date of Recording:	9/30/03
Notes:	

1. Assessor Parcel Num(s)  
 a) 003-192-09  
 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/Twnhs.	d) <input type="checkbox"/>	2-4 Plex
e) <input type="checkbox"/>	Apt. Bldg.	f) <input type="checkbox"/>	Comm'Vnd'l
g) <input type="checkbox"/>	Agricultural	h) <input type="checkbox"/>	Mobile Home
i) <input type="checkbox"/>	Other		

3. Total Value/Sales Pri of Property: \$ 118,879  
 Deed in Lieu of Foreclose Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 1.95

4. If Exemption Claimed:  
 a. Transfer Tax Exempt, 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, Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Frances Galb Capacity Treasurer  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION (REQUIRED)	BUYER (GRANTEE) INFORMATION (REQUIRED)
Print Name: <u>Frances Galb</u>	Print Name: _____
Address: <u>P O Box 6</u>	Address: _____
City: <u>Eureka, NV 89316</u>	City: _____
State: <u>NV</u>	State: _____ Zip: _____

**COMPANY/PERSON REQUESTING RECORDING**  
 (REQUIRED IF NOT THE SELLER/BUYER)  
 Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_