

QUIT CLAIM DEED

APN: 003-241-02

BOOK 377 PAGE 75
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Michael Kincade
2004 MAR 29 PM 3:25

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO
Name: Michael N. Kincade
Address: P.O. Box 2802
City/State/Zip: Rancho Cordova, CA 95741

EUREKA COUNTY, NEVADA
M.N. REBALEATH, RECORDER
FILE NO. FEES 14.00

186117

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY
TREASURER, TRUSTEE, (Stanley F. Clark) for and in consideration of
Four Hundred Forty-three and 42/100 Dollars (\$ 443.42) 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): Michael Nicholas Kincade whose address is (if
applicable): P.O. Box 2802 or 3135 Cowan Circle, situate in the City of Rancho Cordova or
Sacramento, State of California.

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

LOT 2, BLOCK Y, NEVELCO INC. UNIT #2

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 29, 2004.

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 29, 2004
By (person(s) appearing before notary public) Frances E. Gale

Glady Goicoechea
Notary Public

My Commission expires: July 10, 2006 (Notary Stamp)

GLADY GOICOECHEA
Notary Public - State of Nevada
Appointment Recorded in Eureka County
No: 94-0329-8 - Expires July 11 2006

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>186117</u>
Book:	<u>377</u> Page: <u>75</u>
Date of Recording:	<u>3-29-04</u>
Notes:	_____

1. Assessor Parcel Number (s)
 a) 003-241-02
 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/Twnhse | 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 Price of Property: \$ 443,42
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 1.95

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 _____
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Eureka County
 Address: P.O. Box 677
 City: Eureka
 State: NV Zip: 89316

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: _____