

BOOK 381 PAGE 123-124
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Robert Campbell
2004 MAY 14 PM 1:23
EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES /5⁰⁰

187596

Recording Requested By
Send Tax Statements to:
Robert & Kathryn Campbell
P O Box 9432
Moreno Valley, CA 92552-9432
APN #05-340-15
LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 29TH day of APRIL, 2004,
by first party, Grantor, ROBERT R. CAMPBELL, JR.
whose post office address is P.O. BOX 9432 MORENO VALLEY, CA. 92552-9432
to second party, Grantee, ROBERT R. JR. and KATHRYN M. CAMPBELL
whose post office address is P.O. BOX 9432 MORENO VALLEY, CA. 92552-9432

WITNESSETH, That the said first party, for good consideration and for the sum of NO Dollars (\$0.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of EUREKA, State of NEVADA to wit: T30N, R50E, SECTION 27, SE4

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

Signature of Witness

Signature of First Party

Print name of Witness

Print name of First Party

State of CALIFORNIA

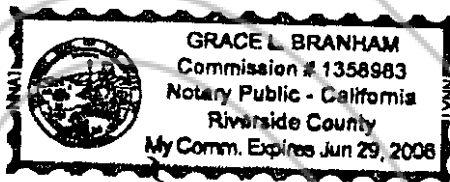
County of RIVERSIDE

On 4/29/04 before me, GRACE L. BRANHAM, appeared ROBERT R. CAMPBELL JR. personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Grace L. Branham

Signature of Notary



Affiant Known Produced ID
Type of ID CA DL (Seal)

State of

County of]

On before me, appeared personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature of Notary

Affiant Known Produced ID
Type of ID (Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 005-340-15
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 187596
Book: 381 Page: 123-124
Date of Recording: 5/14/04
Notes: _____

2. Type of Property:

- | | | | |
|-----------------------------|--------------|-----------------------------|-----------------|
| a) <input 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:

Deed in Lieu of Foreclosure Only (value of property) \$ 0
Transfer Tax Value: \$ _____
Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 5
b. Explain Reason for Exemption: Transferring from husband to husband and wife

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 Robert K Campbell Capacity _____
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Robert Campbell
Address: PO Box 9432
City: Moreno Valley
State: CA Zip: 92552-9432

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Robert & Kathryn Campbell
Address: PO Box 9432
City: Moreno Valley
State: CA Zip: 92552-9432

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____
Address: _____
City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)