

# QUIT CLAIM DEED

APN: 007-440-20

BOOK 381 PAGE 132  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
William H. Norton Jr.  
2004 MAY 17 PM 12:02

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO  
Name: William H Norton Jr.  
Address: 3693 Montclair Rd  
City/State/Zip: Cameron Park, Ca 95682

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

**187602**

THIS INDENTURE WITNESS That the GRANTOR(S): William H Norton Jr.  
and Patricia A Norton for and in consideration of  
one-dollar Dollars (\$ 1.00 ) 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): William H Norton Jr. +  
Patricia A. Norton + William H Norton whose address  
is (if applicable): 3693 Montclair Rd, situate  
in the City of Cameron Pk., County of Sacramento, State of Calif.

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

(Set forth legal description) T21 1/2 N R 54 E MDB + M  
All Sec 33  
Southerly 1,952 Feet Sec 32  
825.92 Ac ±

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 \_\_\_\_\_.

William H Norton Jr.  
Signature of Grantor

Patricia A Norton  
Signature of Grantor

STATE OF NEVADA )  
COUNTY OF EUREKA )

This instrument was acknowledged before me on (date) May 17, 2004  
By (person(s) appearing before notary public) William H and Patricia Norton

Vera Baumann  
Notary Public  
My Commission expires: May 13, 2007



**187602**

BOOK 381 | PAGE | 32

# STATE OF NEVADA DECLARATION OF VALUE

| FOR RECORDERS OPTIONAL USE ONLY |               |
|---------------------------------|---------------|
| Document/Instrument#:           | 187602        |
| Book:                           | 381 Page: 132 |
| Date of Recording:              | 5/17/04       |
| Notes:                          |               |

1. Assessor Parcel Number (s)  
 a) 007-440-20  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

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 checked="" type="checkbox"/> | Mobile Home     |
| i) <input type="checkbox"/> | Other        |  |                 |

3. Total Value/Sales Price of Property: \$ 18,370 1/2 of Market Value  
 Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 72.15

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 Patricia A. Nordon Capacity SELLER  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
(REQUIRED)

**BUYER (GRANTEE) INFORMATION**  
(REQUIRED)

Print Name: Patricia A. Nordon  
 Address: 3193 Montclair Rd.  
 City: Cameron Dr.  
 State: CA Zip: 95162

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

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

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