

Submit Taxes to:
Gary & Melody Garaventa
P.O. Box 65
Eureka, NV 89316

BOOK 382 PAGE 151-152
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Gary Garaventa
2004 JUN -2 PM 2:01

EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES 15-00

187947

LF298-04
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, executed this 5th day of MAY, 2004,
by first party, Grantor, BARBARA N. HOEKENGA TRUST
whose post office address is 925 CONGRESS AVE. GLENDALE, OHIO 45246
to second party, Grantee, GARY G. AND MELODY I. GARAVENTA
whose post office address is P.O. Box 65, EUREKA, NV. 89316

WITNESSETH, That the said first party, for good consideration and for the sum of
FOURTEEN THOUSAND Dollars (\$ 14,000.00)
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:

PARCEL # 007-100-03. TOWNSHIP 22 NORTH, RANGE 50 EAST,
SECTION 19, THE SE 1/4 OF NE 1/4.

PARCEL # 007-100-05. TOWNSHIP 22 NORTH, RANGE 50 EAST,
SECTION 19, THE NE 1/4 OF SW 1/4.

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

Print name of Witness

Signature of Witness

Print name of Witness

Barbara N. Hoekenga
Signature of First Party

BARBARA N. HOEKENGA
Print name of First Party

Signature of First Party

Print name of First Party

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)

State of Ohio }
County of Hamilton }
On 5-5-06 before me,
appeared BARBARA HOEKENGA
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.

D. Lynn Gumprecht
Signature of Notary

Affiant _____ Known ☒ Produced ID _____
Type of ID _____ (Seal)

Notary Public, State of Ohio
My Commission Expires 3-12-06

Signature of Preparer

Print Name of Preparer

Address of Preparer

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) #007-100-03
b) #007-100-05
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 187947
Book: 382 Page: 151-152
Date of Recording: 6/2/04
Notes: _____

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'/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) \$

Transfer Tax Value: \$

Real Property Transfer Tax Due: \$

\$ 14,000.00
\$ _____
\$ _____
\$ 54.60

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 [Signature] Capacity Buyer
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

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

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: GARY GARAVENTA
Address: PO Box 65
City: EUREKA
State: NEVADA Zip: 89316

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)