

187954

BOOK 382 PAGE 176

OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF

Walter Cuchine and Judi Klindt  
2004 JUN -4 PM 4:31

APN: 001-106-03  
Recording requested by and mail documents and  
tax statements to:

Name: JUDITH A. KLINDT  
Address: P.O. BOX 70  
City/State/Zip: EUREKA, NEVADA 89316

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

187954

14.00

AMENDED / CORRECTED  
QUITCLAIM DEED  
Creating Joint Tenancy

Dated this 4TH day of JUNE, 2004

For valuable consideration, the sum of TEN Dollars (\$10.00) I/We the  
undersigned JUDITH A. KLINDT & WALTER E. CUCHINE  
who acquired title to that certain property described below, and who is the Grantor(s) herein,  
does hereby Quitclaim to: JUDITH A. KLINDT & WALTER E. CUCHINE  
as Joint Tenants, and Grantee(s) all that real property situated in the City of EUREKA  
County of EUREKA State of NEVADA described as:

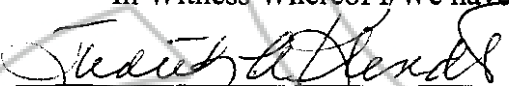
2/3 INTEREST IN LOT 4 BLOCK 35, AS THE SAME APPEARS UPON THE OFFICIAL MAP  
THEREOF ON FILE IN THE OFFICE OF THE COUNTY RECORDER, EUREKA COUNTY, NEVADA.

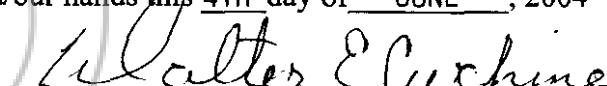
TO CORRECT QUITCLAIM DEED FILE #187832 RECORDED 5/17/04 (BOOK 381 PAGE 360)

TOGETHER WITH ALL the buildings and improvements situate thereon.

TOGETHER with all and singular the tenements, hereditaments and appurtenances thereunto belonging or  
in anywise appertaining the reversion and reversions remainder and remainders, rents, issues and profits thereof.

In Witness Whereof I/We have set my hand/our hands this 4TH day of JUNE, 2004

  
Signature

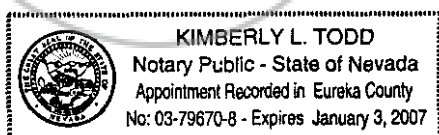
  
Signature


JUDITH A. KLINDT  
Print or type name here

WALTER E. CUCHINE  
Print or type name here

STATE OF NEVADA )  
COUNTY OF EUREKA )

On this 4th day of June, 2004, personally appeared before me, a notary public,  
Judith A Klindt : Walter E Cuchine who acknowledged that he/she/they  
executed the above instrument.



  
Notary Public

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# STATE OF NEVADA DECLARATION OF VALUE

## 1. Assessor Parcel Number (s)

- a) 001-106-03  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

### FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 187954  
Book: 382 Page: 176  
Date of Recording: June 4, 2004  
Notes: \_\_\_\_\_

## 2. Type of Property:

- |                             |              |  |                 |
|-----------------------------|--------------|--|-----------------|
| a) <input type="checkbox"/> | Vacant Land  | b) <input checked="" 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) \$ 30,000  
Transfer Tax Value: \$ \_\_\_\_\_  
Real Property Transfer Tax Due: \$ \_\_\_\_\_

## 4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 3  
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 \_\_\_\_\_ Capacity \_\_\_\_\_  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

### SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Walter Carline  
Address: Box 242  
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: \_\_\_\_\_

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)