

Quitclaim Deed

BOOK 389 PAGE 276-277
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Mortyuma Miller
2004 AUG -5 PM 1:27

EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES 15.00

THIS QUITCLAIM DEED, executed this 25 day of JUNE 190765, 20004
by first party, Grantor, VERNON G. FORSYTH
whose post office address is RT 3 BOX 1631-CHANDLER, OK 74834
to second party, Grantee, VERNON E. FORSYTH and CAROLYN FORSYTH, Husband & WIFE
whose post office address is RT 3 BOX 1633 CHANDLER, OK 74834

WITNESSETH, That the said first party, for good consideration and for the sum of 0
Dollars (\$0)

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:

TOWNSHIP 29 NORTH, RANGE 49 EAST, SECTION 31: LOTS 394 (W $\frac{1}{2}$ S $\frac{1}{4}$)

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: Cecil Anderson

Print name of Witness: Cecil Anderson

Signature of Witness: Bertha Stinson

Print name of Witness: Bertha Stinson

Signature of First Party: [Signature]

Print name of First Party: VERNON G FORSYTH

Signature of Second Party: [Signature]

Print name of Second Party: _____

Signature of Preparer _____

Print Name of Preparer CAROLYN FORSYTH

Address of Preparer Carolyn Forsyth

State of Oklahoma
County of Lincoln }

On June 25, 2004 before me, Lois A. Gilbert
appeared Vernon G. Forsyth and Carolyn Forsyth

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.

Lois A. Gilbert
Signature of Notary 4-2-05 # 01004186

Affiant Known Produced ID
Type of ID _____
(Seal)

190765

BOOK 389 PAGE 277

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)
 a) 005-700-07
 b) _____
 c) _____
 d) _____

2. Type of Property:
 a) Vacant Land b) Single Fam. Res.
 c) Condo/Twnhse d) 2-4 Plex
 e) Apt. Bldg f) Comm'l/Ind'l
 g) Agricultural h) Mobile Home
 Other

FOR RECORDERS OPTIONAL USE ONLY
 Document/Instrument #: 190765
 Book 389 Page: 276-277
 Date of Recording: 8/5/04
 Notes:

3. Total Value/Sales Price of Property \$ N/A
 Deed in Lieu of Foreclosure Only (value of property) (N/A)
 Transfer Tax Value: \$ N/A
 Real Property Transfer Tax Due \$ N/A

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section 9
 b. Explain Reason for Exemption: SON TO PARENTS

5. Partial Interest: Percentage being transferred: 25 %

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 Vernon G. Forsyth Capacity SELLER
 Signature Vernon E. Forsyth Capacity GRANTEE
Carolyn Forsyth

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

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

Print Name: VERNON G. FORSYTH
 Address: RT 3 BOX 1633
 City: CHANDLER
 State: OK Zip: 74834

Print Name: VERNON E & CAROLYN FORSYTH
 Address: RT 3 BOX 1633
 City: CHANDLER
 State: OK Zip: 74834

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: MONTEZUMA MINES INC Escrow # _____
 Address: 559 W. SILVER ST
 City: ELKO State: NV Zip: 89801