

QUIT CLAIM DEED

APN: 07-394-18

BOOK 418 PAGE 285
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
John Asche
2005 AUG -8 PM 3:04

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

200252

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: BONNIE A. ASCHÉ
Address: PO BOX 601
City/State/Zip: EUREKA NV 89316

THIS INDENTURE WITNESS That the GRANTOR(S): BONNIE A AND JOHNA ASCHÉ for and in consideration of

10 Dollars (\$ 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): BONNIE A. ASCHÉ

PO BOX 601 whose address is (if applicable): _____, situate

in the City of EUREKA, County of EUREKA, State of NV.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:
(Set forth legal description) PARCEL A OF LOT 1 OF PARCEL D AS SHOWN ON THAT CERTAIN PARCEL MAP FOR JOHN A. & JOSEPHINE L. ASCHÉ AS PER MAP FILE # 126194 FILED IN THE OFFICIAL RECORDS OF EUREKA COUNTY, NEVADA

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

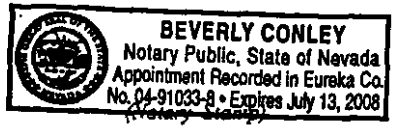
John A. Asche
Signature of Grantor

Bonnie A Asche
Signature of Grantor

STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) 8/8/05
By (person(s) appearing before notary public) John Asche & Bonnie Asche

Beverly Conley
Notary Public
My Commission expires: 7/13/2008



200252

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>200252</u>
Book: <u>418</u>	Page: <u>285</u>
Date of Recording:	<u>8-8-05</u>
Notes:	

1. Assessor Parcel Number (s)
 a) 7-394-18
 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'Vind'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: _____ \$
 Deed in Lieu of Foreclosure Only (value of property) _____ \$
 Transfer Tax Value: _____ \$
 Real Property Transfer Tax Due: _____ \$

4. If Exemption Claimed:
 a. Transfer Tax Exemption, per NRS 375.090, Section: _____
 b. Explain Reason for Exemption: 4
SPOUSE TO SPOUSE

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 John A. Asche Capacity SELLER
 Signature Donna A. Asche Capacity Buyer

SELLER (GRANTOR) INFORMATION		BUYER (GRANTEE) INFORMATION	
(REQUIRED)	(REQUIRED)	(REQUIRED)	(REQUIRED)
Print Name:	<u>JOHN A. ASCHÉ</u>	Print Name:	<u>Donna A. Asche</u>
Address:	<u>PO Box 601</u>	Address:	<u>PO Box 601</u>
City:	<u>FUREKA</u>	City:	<u>FUREKA NV</u>
State:	<u>NV</u> Zip: <u>89316</u>	State:	<u>NV</u> Zip: <u>89316</u>

COMPANY/PERSON REQUESTING RECORDING
 (REQUIRED IF NOT THE SELLER OR BUYER)
 Print Name: _____ Escrow # _____
 Address: _____
 City: _____ State: _____ Zip: _____