

QUIT CLAIM DEED

APN: 003-011-07

BOOK 423 PAGE 295
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Eureka County Treasurer
2005 SEP 22 PM 1:03

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

201140

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Elaine and/or Kirt A. Peterson
Address: P.O. Box 211228
City/State/Zip: Crescent Valley, NV 89821

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE, (Marion Gould) for and in consideration of One Thousand Five Hundred and no 100's Dollars (\$1,500.00) 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): Elaine and/or Kirt A. Peterson whose address is (if applicable): P.O. Box 211228 or McDaniel Street, situate in the Town of Crescent Valley, County of Eureka, State of Nevada.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:
CVR&F Unit #3, Block 4, Lot 6

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 September 22, 2005.

Frances Gould
Signature of Grantor

Signature of Grantor

STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) Sept. 22, 2005
By (person(s) appearing before notary public) Frances Gould

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



(Stamp)

201140

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>201140</u>
Book:	<u>423</u> Page: <u>295</u>
Date of Recording:	<u>9-22-05</u>
Notes:	_____

1. Assessor Parcel Number (s)
 a) 003-011-07
 b) _____
 c) _____
 d) _____

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/Indl |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property: \$ 1,500.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 5,955.85

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 Frances Gale Capacity Eureka County Treasurer
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION		BUYER (GRANTEE) INFORMATION	
(REQUIRED)		(REQUIRED)	
Print Name:	<u>Frances Gale</u>	Print Name:	_____
Address:	<u>PO Box 677</u>	Address:	_____
City:	<u>Eureka</u>	City:	_____
State:	<u>NV</u> Zip: <u>89316</u>	State:	_____ Zip: _____

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