

# QUIT CLAIM DEED

APN: 003-194-06

BOOK 423 PAGE 300  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*Eureka County Treasurer*  
2005 SEP 22 PM 1:10

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

**201145**

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Matthew Robert Sage  
Address: 5651 Fieldcrest Drive  
City/State/Zip: Camarillo, CA 93012

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY TREASURER, TRUSTEE, (Clarence and Margaret McIntire) for and in consideration of Seven Hundred and no 100's Dollars (\$700.00) 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): Matthew Robert Sage whose address is (if applicable): 5651 Fieldcrest Drive, situate in the Town of Camarillo, County of \_\_\_\_\_, State of California. All that certain property in the County of Eureka, State of Nevada bounded and described as follows:

**Nevelco Inc. Unit# 1, S2SW4 of Lot 53**

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 Gale  
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 Gale

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

 BEVERLY CONLEY  
Notary Public, State of Nevada  
Appointment Recorded in Eureka Co.  
No. 04-81033-8 • Expires 7/13/2008

**201145**

# STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>201145</u>
Book:	<u>423</u> Page: <u>300</u>
Date of Recording:	<u>9-22-05</u>
Notes:	_____

1. Assessor Parcel Number (s)  
 a) 003-194-06  
 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'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: \$ 700.00  
 Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 3.90

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)  
 Print Name: Frances Gale  
 Address: PO Box 677  
 City: Eureka  
 State: NV Zip: 89316

(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: \_\_\_\_\_