

QUIT CLAIM DEED

APN: 7-393-09

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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Louise Washburn
2005 OCT 25 PM 1:30

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO
Name: DANIEL W. WASHBURN
Address: P.O. Box 8
City/State/Zip: Eureka, Nev. 89316

EUREKA COUNTY, NEVADA
M.N. REBALEATI, RECORDER
FILE NO. 201395
FEES 14.00

THIS INDENTURE WITNESS That the GRANTOR(S): Louise Washburn
Louise Washburn for and in consideration of
Ten Dollars Dollars (\$ 10.00) 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): Daniel W. Washburn
Louise Washburn as Joint Tenants whose address
is (if applicable): 355 El Centro, situate
in the City of Eureka, County of Eureka, State of Nevada

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 2 of parcel 7. as shown on that
certain parcel map for Earl and Luvernia Rasmussen. File no 114556
located in a portion of the E 1/2 of section 17 T 20N, R 53 E,
M.D.M.

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 _____.

Louise Washburn
Signature of Grantor

Signature of Grantor

STATE OF NEVADA)
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) October 25, 2005
By (person(s) appearing before notary public) Louise Washburn

Glady Socorro
Notary Public
My Commission expires: 7/10/2006

GLADY SOCORRO
Notary Public - State of Nevada
(Notary Stamp) Eureka County
2005-2006 Expires July 10, 2006

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STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	<u>201395</u>
Book:	<u>425</u> Page: <u>236</u>
Date of Recording:	<u>10-25-05</u>
Notes:	

1. Assessor Parcel Number (s)

- a) 7-393-09
- 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'Vnd'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: 5
- b. Explain Reason for Exemption: From Mother to Son

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 Louise Washburn Capacity Seller
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: LOUISE WASHBURN
 Address: P.O. - Box 8
 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)