

APN # 002-032-04 and 002-032-19

BOOK *442* PAGE *95-96*  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*Sandy Smales*  
2006 AUG 31 PM 2:17

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

FEES *15<sup>00</sup>*

**206101**

**QUITCLAIM DEED**

**THIS INDENTURE WITNESSETH:** That DONALD J. SMALES, Grantor, for lawful consideration, the receipt of which is hereby acknowledged, does hereby forever remise, release and quitclaim unto SANDY SMALES, n/k/a SANDY DANN, and to her heirs and assigns forever, any and all interest Grantor may have in that certain real property situate in the County of Elko, State of Nevada, and more particularly described as follows:

LOTS 4 and 5 OF BLOCK 12 of the CRESCENT VALLEY RANCH & FARMS UNIT NO. 1 as shown on the subdivision map recorded April 6, 1959 in the Office of the County Recorder of Eureka County, Nevada as File No. 34081, Eureka County, Nevada;

**TOGETHER WITH** the tenements, hereditaments, and appurtenances thereunto belonging

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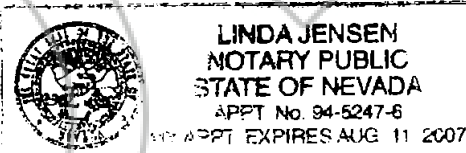
or appertaining, and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand on this 22<sup>nd</sup> day of August, 2006.

  
DONALD J. SMALES, Grantor

STATE OF NEVADA)  
: ss.  
COUNTY OF ELKO)

On this 22 day of August, 2006, personally appeared before me, a Notary Public, Donald J. Smales, who acknowledged that he executed the foregoing QUITCLAIM DEED.



  
Notary Public

My commission expires on: 8-11-07

**WHEN RECORDED, MAIL AND SEND TAXES TO:**

Sandy Dann  
f/k/a Sandy Smales  
P.O. Box 211068  
Crescent Valley, Nevada 89821

206101

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# STATE OF NEVADA DECLARATION OF VALUE

## 1. Assessor Parcel Number(s)

- a) 002-032-04  
 b) 002-032-19  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

## FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument: 206101  
 Book: 442 Page: 95-96  
 Date of Recording: 8-31-06  
 Notes: \_\_\_\_\_

## 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/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) \$ 6  
 Transfer Tax Value: \$ Former Spouse  
 Real Property Transfer Tax Due: \$ \_\_\_\_\_

## 4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.030, 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 Sindy Pfann Capacity buyer  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

## SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_

## BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Sindy Pfann  
 Address: Box 21068 - 253 2nd St.  
 City: Crescent Valley  
 State: Nev. Zip: 89821

## 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)