

APN: N/A  
Recording requested by and mail documents and  
tax statements to:

Name: .....  
Address: .....  
City/State/Zip: .....

**DED104**  
Nevada Legal Forms & Books, Inc. (702) 870-8977  
[www.legalformsrus.com](http://www.legalformsrus.com)

**DOC # 0207324**

12/18/2006 04:45 PM

**Official Record**  
Recording requested By  
NANCY MINOLETTI

Eureka County - NV  
**Mike Rebaleati - Recorder**  
Fee: \$16.00 Page 1 of 3  
RPTT: Recorded By: FES  
Book- 0449 Page- 0078



RPTT: \_\_\_\_\_

## QUITCLAIM DEED

THIS INDENTURE WITNESS That the GRANTOR(S): Pamela S. Scott

for and in consideration of Ten Dollars (\$ 10.00 )

do hereby QUITCLAIM the right, title and interest, if any, which GRANTOR may have in all that real  
property, the receipt of which is hereby acknowledged, to the GRANTEE(S): Pamela S. Scott,  
Nancy M. Minoletti, Richard A. McKay

all that real property situated in the City of \_\_\_\_\_  
County of Eureka, State of Nevada

bounded and described as follows: (Set forth legal description and commonly known address)

Unpatented  
Four mining claims:

Van #1	NMC722743
Van #2	NMC722744
Van #3	NMC722745
Van #4	NMC722746

Township 15N, Range 52E, Section 2, 3 + 10

**WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU  
WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER  
RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.**

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 22 day of November, 2006.

Pamela S. Scutt  
Signature of Grantor

Pamela S. Scutt  
Print or Type Name Here

Richard A. McKay  
Signature of Grantor

Richard A. McKay  
Print or Type Name Here

STATE OF Nevada )  
COUNTY OF Washoe )  
On this 22 day of November, 2006, personally appeared

before me, a Notary Public, Pamela S. Scutt

☐ personally known to me OR ☒ proved to me on the basis of satisfactory evidence to be the person(s) described in and who executed the foregoing instrument in the capacity set forth therein, who acknowledged to me that they executed the same freely and voluntarily and for the uses and purposes therein mentioned. Witness my hand and official seal.

Monica Sanchez  
Notary Public

My commission expires: December 1, 2009

Consult an attorney if you doubt this forms fitness for your purpose.



# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Santa Clara

SS.

On

December 10, 2006

Date

before me,

Cinda L. Meister, Notary Public

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared

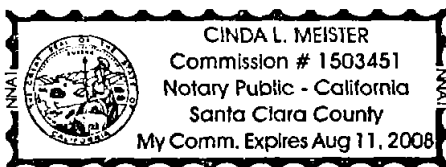
Richard A. McKay

Name(s) of Signer(s)

☐ personally known to me

☒ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Cinda L. Meister

Signature of Notary Public

Place Notary Seal Above

## OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

### Description of Attached Document

Title or Type of Document:

Quitclaim Deed

Document Date:

Number of Pages:

2

Signer(s) Other Than Named Above:

Pamela S. Scott

### Capacity(ies) Claimed by Signer

Signer's Name:

☐ Individual

☐ Corporate Officer — Title(s):

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other:

Signer Is Representing:

RIGHT THUMBPRINT  
OF SIGNER

Top of thumb here



0207324

Book  
Page

449  
80

12/18/2006  
Page 3 of 3

STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-207324

12/18/2006

04:45 PM

FO  
Do  
Bo  
Da  
No

Official Record

Recording requested By  
NANCY MINOLETTI

Eureka County - NV

Mike Rebaleati - Recorder

Page 1 of Fee: \$16.00  
Recorded By: FES RPTT:  
Book- 0449 Page- 0078

1. Assessor Parcel Number (s)

- a) \_\_\_\_\_  
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'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:

Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
Transfer Tax Value: \$ \_\_\_\_\_  
Real Property Transfer Tax Due: \$ 0

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 8  
b. Explain Reason for Exemption: Unpatented Mining Claim

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 Nancy Minoletti Capacity Buyer  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION

(REQUIRED)

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

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Nancy Minoletti  
Address: PO Box 185  
City: Eureka  
State: NV Zip: 89316

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)