

RECORDING REQUESTED BY,  
MAIL TAX STATEMENTS TO,  
AND WHEN RECORDED MAIL TO:

Brian Palkowski  
P.O. Box 189  
Martinez, CA 94553

**DOC # 0209154**

04/30/2007

02:00 PM

**Official Record**

Recording requested By  
ACUNA & CASAS PC

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT:

Recorded By: FES

Book- 0456 Page- 0317



A.P.N.: 005-340-32

**QUITCLAIM DEED (TRUST TRANSFER)**

The undersigned declares that the Real Property Transfer Tax is -0-.  
Exempt NRS 375.090 § 07: not a sale, transfer without consideration to a revocable trust  
for the benefit of the grantor or grantor's spouse [Trust Certificate provided].

FOR NO CONSIDERATION, Brian Palkowski hereby quitclaims to

Brian Palkowski, as Trustee of The Brian Palkowski Revocable Trust UDT  
dated September 12, 2006

the beneficiary of which is the Grantor, all of his interest in real property in the  
Unincorporated Area, County of Eureka, State of Nevada, more particularly described as:

TOWNSHIP 30 NORTH, RANGE 50 EAST, M.D.B. & M.

Section 33: Northeast Quarter (NE 1/4) of the Southeast Quarter (SE 1/4) Reserving,  
the right and title, to 50% of remaining, gas, coal, oil, and minerals of every kind.

THE TRUSTEE AND ANY SUCCESSOR TRUSTEE SHALL HAVE FULL RIGHT TO SELL OR ENCUMBER  
THE PROPERTY DESCRIBED HEREIN.

Dated: April 27, 2007

  
BRIAN PALKOWSKI

**ACKNOWLEDGMENT**

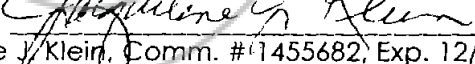
STATE OF CALIFORNIA

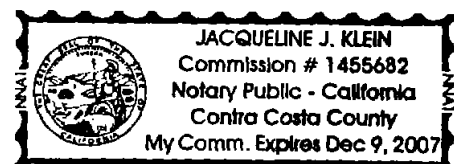
COUNTY OF CONTRA COSTA

SS

On April 27, 2007, before me, Jacqueline J. Klein, notary public, personally appeared Brian Palkowski, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature:   
Jacqueline J. Klein, Comm. #1455682, Exp. 12/9/2007  
Contra Costa Co, Stamp Manu. NNA1, (925) 906-1880



**STATE OF NEVADA  
DECLARATION OF VALUE FORM**

**1. Assessor Parcel Number(s)**

a. 005-340-32  
b. \_\_\_\_\_  
c. \_\_\_\_\_  
d. \_\_\_\_\_

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**2. Type of Property:**

a. ☒ Vacant Land b. ☐ Single Fam. Res.  
c. ☐ Condo/Twnhse d. ☐ 2-4 Plex  
e. ☐ Apt. Bldg f. ☐ Comm'l/Ind'l  
g. ☐ Agricultural h. ☐ Mobile Home  
i. ☐ Other \_\_\_\_\_

**Eureka County - NV**

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Page 1 of 1 Fee \$14.00

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**3. a. Total Value/Sales Price of Property**

\$ 0.00

**b. Deed in Lieu of Foreclosure Only (value of property)**

( )

**c. Transfer Tax Value:**

\$ 0.00

**d. Real Property Transfer Tax Due**

\$ 0.00

**4. If Exemption Claimed:**

a. Transfer Tax Exemption per NRS 375.090, Section 07

b. Explain Reason for Exemption: Transfer without consideration to a revocable trust for the benefit of the Grantor. [Certification of Trust enclosed - NOT a Public Document]

**5. Partial Interest: Percentage being transferred: 100.00 %**

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 parties agree that 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 Brian Palkowski

Capacity Trustee

Signature \_\_\_\_\_

Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**

Print Name: Brian Palkowski  
Address: P.O. Box 189  
City: Martinez  
State: CA Zip: 94553

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**

Print Name: Brian Palkowski, Trustee  
Address: P.O. Box 189  
City: Martinez  
State: CA Zip: 94553

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

Print Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_

Escrow #: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_