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[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Quitclaim Deed

Date of this Document: 9/22/08

Reference Number of Any Related Documents: _____

Grantor:

Name MICHAEL VINCENT HOOK
Street Address 1603 AVE F
City/State/Zip HAWARDEN IOWA 51023

Grantee:

Name Lee + Nancy Loudon
Street Address 6336th ST
City/State/Zip Crescent Valley Nv. 89821

Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Parcel # 002-025-04, Lots 8 and 9, Block 1 of Crescent Valley Ranch and Farms Unit 1

Assessor's Property Tax Parcel/Account Number(s): 002-025-04

THIS QUITCLAIM DEED, executed this 22 day of Sep., 2008, by first party, Grantor, Michael Vincent Hook, whose mailing address is 1603 AVE. F Hawarden Iowa 51023, to second party, Grantee, Lee + Nancy Loudon, whose mailing address is Box 21207 Crescent Valley Nv. 89821

WITNESSETH that the said first party, for good consideration and for the sum of Fifteen Thousand Dollars (\$ 15000.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Esuka, State of Nevada to wit: Parcel # 002-025-04, Lots 8+9, Block 1, of Crescent Valley Ranch and Farms Unit 2

IN WITNESS WHEREOF, the said first party has signed and sealed these presents the day and year first written above. Signed, sealed and delivered in the presence of:

Signature of Witness _____

Print Name of Witness _____

Signature of Witness _____

Print Name of Witness _____

Signature of Grantor Michael V Hook

Print Name of Grantor MICHAEL V HOOK

State of Nevada

County of Esico

On 22nd Sept 2008, before me, Bridget Carroll, Notary Public, appeared Michael V. Hook, personally known to me (or 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.

Bridget Carroll
Signature of Notary



Affiant Known Produced ID
Type of ID INDL#
(Seal)

STATE OF NEVADA DECLARATION OF VALUE

DOC # DV-212478

09/23/2008

09:38 AM

Official Record

1. Assessor Parcel Number (s)

- a) 002-025-04
- b) _____
- c) _____
- d) _____

FOR RECOR

Document/Tr

Book: _____

Date of Rec

Notes: _____

Recording requested By
LEE LOUDEN

Eureka County - NV

Mike Rebaleati - Recorder

Page 1 of 1 Fee: \$40.00
Recorded By: FS RPTT: \$93.60
Book- 0477 Page- 0113

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

3. Total Value/Sales Price of Property:

\$ 24,000.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 93.60

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 _____ Capacity _____
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)

Print Name: WALTRAUD E. BAUER
 Address: 18482 MARY BALL RD.
 City: WHITE STONE
 State: VA Zip: 22578

BUYER (GRANTEE) INFORMATION (REQUIRED)

Print Name: MICHAEL V. HOOK
 Address: 8070 AIRPORT AVE., P.O. BOX 211069
 City: CRESCENT VALLEY
 State: NV Zip: 89821

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: Michael V Hook AND Shelda Hook
 Address: PO Box 211069
 City: Crescent Vly Nv 89821 State: _____ Zip: _____
 Escrow # _____