		DOC 01/26/2		
Γ	٦	Offic Recording rec PATRICIA ITHU	uested By	
			eati - Recorder Page 1 of 2 Recorded By FES Page- 0085	
L	J	0213057		
[If required by you	Above Space Reserved for R ur jurisdiction, list above the name & address of: 1) where to re		3) party requesting recording.]	
Quito	laim Deed			
Date of this Docu	ument: October 24, 2007			
Reference Numbe	er of Any Related Documents: <u>Toint</u> Te	nancy Deed	t 63212 July 8, 1977	
Grantor:				
Name	Junes J. and Nadine E 6818 South 2485 East	: Mahoney		
Street Address City/State/Zip	Salt Lake City, Utah	84121-32	216	
Grantee:	Patricia A. Ithurralde	and Maureer	n T. Thiessen	
Street Address	6018 South 2485 East			
City/State/Zip	Salt Lake City, Utah	84121-321	6	
Abbreviated Lega condo name):	al Description (i.e., lot, block, plat <i>or</i> section, towns All of lots 2, 3 and	hip, range, quarter/quar d H of E	ter <i>or</i> unit, building and Block 57	
Assessor's Proper	rty Tax Parcel/Account Number(s)	93-02		
THIS QUITCLAIL	M DEID ASSOCIATION	day of Oc	tober	
mailing address is second party, Gra	s <u>10818 South 2485 East</u> antee, <i>Patricia A. Ithurralde</i>	S.L.C., Ut. and Maureer	84121-3216 to T. Thiessen,	
whose mailing address is 6818 South 2485 East, S.L.C., Ut. 84121-3216				

which the said first party has in and to the following described parcel of land, and improvements and appurtenance
thereto in the County of <u>Eure Ka</u> , State of <u>Nevada</u>
to wit: All of lots 2, 3 and 4 of Black 57
80 North Edwards Street
Eureka, Nevada 89316
District 1.0 Roll number 002836
<b>IN WITNESS WHEREOF</b> , 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 Waleness Chaleness Chaleness
Print Name of Witness Waltric P. Durkee
Signature of Witness  Print Name of Witness  ANGLE BYOLUND
Signature of Grantor Print Name of Grantor  Nadine Mahoney
State of
On <u>CC1 34, 3007</u> , before me, <u>Sherry</u> Dhorpe, appeared <u>Nadine Mahaney</u> , 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.
Signature of Notary
Affiant Known Produced ID Type of ID  (Seal)

## STATE OF NEVADA DECLARATION OF VALUE

1	FOR RECO
1. Assessor Parcel Number (s)	01/26/2009 09.11 AM Document/ Official Record
a) 001-093-02	Book:
b)	Date of Re Recording requested By PATRICIA ITHURRALDE
c)	Notes: . Eureka County - NV
d)	Mike Rebaleati - Recorder
2. Type of Property:	
a) Vacant Land b) Single Fam	Page 1 of 1 Fee: \$40 00 Res. Recorded By FES RPTT:
c) Condo/Twnhse d) 2-4 Plex	Book- 0485 Page- 0085
e)	
I) 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: <u>Trans</u>	ter from mother to
daughters.	\ / /
5. Partial Interest: Percentage being transferred:	%
o. I dittal litterest. I crooklage being translation.	
The undersigned declares and acknowledges, under pe	nalty of perjury, pursuant to NRS 375.060
and NRS 375.110, that the information provided is corre	
belief, and can be supported by documentation if called	
provided herein. Furthermore, the disallowance of any	
of additional tax due, may result in a penalty of 10% of t	ne tax due plus interest at 1% per month.
Durange At A NDC 675 000 Also Duranged Caller shall	be interest and accomplish timble for any
Pursuant to NRS 375.030, the Buyer and Seller shall	be jointly and Severally liable for any
additional amount owed.	a " " drie a t
Signature fatting thursele	Capacity <u>aaughter</u> , agent
Signature	Capacity
/ <del></del>	JYER (GRANTEE) INFORMATION (REQUIRED)  Maureen Thiesse
(REQUIRED)  Print Name: Nadine E. Mahaney Prin	. ,
11000	74.11.5
10011 300111 1013	
State: <u>Ut of</u> Zip: <u>84/2</u> Stat	
COMPANY/PERSON REQUESTING RECORD	ING
(REQUIRED IF NOT THE SELLER OR BUYER)	<del>· · · · · ·</del>
Print Name:	Escrow#
Address:	
City: State:	Zip:

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)

