

QUIT CLAIM DEED

APN: 05-020-42

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO  
Name: RUNE C. HANSEN  
Address: PO Box 751  
City/State/Zip: CLATSKANIE OR 97016

DOC # 0213236

04/15/2009 12:55 PM

Official Record

Recording requested By  
RUNE HANSEN

Eureka County - NV  
Mike Rebaleati - Recorder

Fee: \$14.00 Page 1 of 1  
RPTT: \$52.65 Recorded By: FES  
Book- 0486 Page- 0328



THIS INDENTURE WITNESS That the GRANTOR(S): JAMES M MURPHY

for and in consideration of  
THIRTEEN THOUSAND FIVE HUNDRED Dollars (\$13,500.00) do hereby QUIT CLAIM the  
right, title and interest, if any, which GRANTOR(S) may have in all that real property, the receipt of  
which is hereby acknowledged, to the GRANTEE(S): RUNE C. HANSEN

whose address  
is (if applicable): PO Box 751, situate  
in the City of CLATSKANIE, County of COLUMBIA, State of OREGON.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:  
(Set forth legal description) T31 N, R48E SEC. 33 N 1/2 NE 1/4 NE 1/4

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 \_\_\_\_\_.

[Signature]  
Signature of Grantor

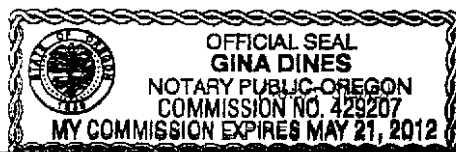
\_\_\_\_\_  
Signature of Grantor

STATE OF NEVADA )  
                                  )  
COUNTY OF EUREKA )

This instrument was acknowledged before me on (date) 06 March 2009  
By (person(s) appearing before notary public) James Murphy

[Signature]  
Notary Public

My Commission expires: May 21, 2012



**STATE OF NEVADA  
DECLARATION OF VALUE**

**DOC # DV-213236**  
04/15/2009 12:55 PM  
**Official Record**

FOR RECOR  
Document/In  
Book: \_\_\_\_\_  
Date of Rec: \_\_\_\_\_  
Notes: \_\_\_\_\_

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RUNE HANSEN  
  
Eureka County - NV  
**Mike Rebaleati - Recorder**  
  
Page 1 of 1 Fee: \$14.00  
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1. Assessor Parcel Number (s)  
a) 05-020-42  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

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:      \$ 13,500.00  
Deed in Lieu of Foreclosure Only (value of property)      \$ N/A  
Transfer Tax Value:      \$ 13,500.00  
Real Property Transfer Tax Due:      \$ 48.75 52.65

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 [Signature] Capacity SELLER  
Signature [Signature] Capacity BUYER

<b>SELLER (GRANTOR) INFORMATION</b>		<b>BUYER (GRANTEE) INFORMATION</b>	
(REQUIRED)		(REQUIRED)	
Print Name:	<u>JAMES M MURPHY</u>	Print Name:	<u>RUNE C HANSEN</u>
Address:	<u>142 GHAET RD</u>	Address:	<u>PO Box 751</u>
City:	<u>RANDLE</u>	City:	<u>CLATSkanie OREGON</u>
State:	<u>WA</u> Zip: <u>98377</u>	State:	Zip: <u>97016</u>

**COMPANY/PERSON REQUESTING RECORDING**  
(REQUIRED IF NOT THE SELLER OR BUYER)  
Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_