

## Official Record

Recording requested By  
DAVID A BLANCOEureka County - NV  
Mike Rebaleati - Recorder

Fee: \$15.00

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RPTT:

Recorded By: FES

Book- 503 Page- 0060

## RECORDING REQUESTED BY:

Please send recorded copy to:

Gloria Jean Hansen DAVID A. BLANCO AND ROBIN K.  
P. O. Box 344 HC 62 BOX 110 7TH ST. BLANCO  
Eureka, NV 89316

QUITCLAIM DEED

I, Gloria Jean Hansen, of Eureka, Nevada, the grantor, for and  
in consideration of one dollar (\$1), receipt of which is hereby acknowledged, do hereby remise,  
release and forever quitclaim to Robin Kay Blanco and David A. Blanco, Eureka, Nevada,  
grantee, all interest which I have, if any, in the following described real estate:

*Parcel Number: 007-370-05: 6. 2, N2 of Lot 1*  
*Property Location: 191 SR278, Sec 21, Por. of Sec.22,*  
*& por. of Sec.28-T20N, R53E, U.7 L. 226 1 AC*  
*Physical Address: Diamond Country Road, Truck Stop, Hwy 278*

Together with all singular the tenements, hereditaments and appurtenances thereunto  
belonging or in anywise appertaining:

## WITNESSES:

[Signature]  
Signature

9-3-10  
Date

[Signature]  
Signature

9/03/10  
Date

STATE OF NEVADA            )  
  )ss.  
County of Eureka            )

On this 3<sup>rd</sup> day of September, 2010, personally before me, a Notary Public in and for said County and State, Gloria Jean Hansen, known to me to be the person described in and who executed the foregoing *Quitclaim Deed*, who acknowledged to me that ~~she~~ executed the same freely and voluntarily, and that the witnesses stated above witnessed at the request of the Gloria Jean Hansen, the execution of this deed to be bound thereby for the uses and purposes therein mentioned.

Signature: *[Handwritten Signature]*

In WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year last above written.



*[Handwritten Signature]*  
NOTARY PUBLIC



STATE OF NEVADA  
DECLARATION OF VALUE

DOC # DV-215449

09/03/2010

03:09 PM

Official Record

1. Assessor Parcel Number (s)

a) 007-370-05  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

FOR RECOR

Document/In:  
Book: \_\_\_\_\_  
Date of Reco:  
Notes: \_\_\_\_\_

Recording requested By  
DAVID A BLANCO

Eureka County - NV

Mike Rebaleati - Recorder

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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 checked="" type="checkbox"/>	Comm' Wind'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: \$

4. If Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: 5

b. Explain Reason for Exemption:

Transfer To Daughter and SON-IN-LAW

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 David Blanco Capacity Grantee  
Signature \_\_\_\_\_ Capacity \_\_\_\_\_

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: GLORIA HANSEN  
Address: PO BOX 311  
City: EUREKA  
State: NV Zip: 89316

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: DAVID A BLANCO  
Address: HC 62 BOX 110 TRST  
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)