## DOC # 0216118

ficial Recording requested By D S HADNOT DDS

Record

Eureka County - NV Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 Recorded By

Book- 510 Page 0002



**Quit Claim Deed** 

Recording requested by, and mail Tax Statement to:

Douglas S. Hadnot PO Box 278 Lolo, MT 59847

APN: 005-410-05

THIS INDENTURE WITNESS That the GRANTORS: STEPHEN S. ELLIS, M.D., RETIREMENT TRUST, of 162 Jayhawk Lane, Hamilton, Montana 59840, an undivided 50% interest, and DOUGLAS S. HADNOT, TRUSTEE, FAMILY DENTAL GROUP, P.C., PROFIT SHARING AND PENSION PLAN, of P.O. Box 278, Lolo, Montana 59847, an undivided 50% interest, do hereby QUIT CLAIM the right, title and interest, if any, which GRANTORS may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEES: DOUGLAS S. HADNOT, AND SUSAN K. HADNOT AS JOINT TENANTS, of P.O. Box 278, Lolo, Montana 59847, an undivided 50% interest, and STEPHEN S. ELLIS II, AND JACQUELINE G. ELLIS II AS JOINT TENANTS, of 162 Jayhawk Lane, Hamilton, Montana 59840, an undivided 50% interest. All that certain property in the County of Eureka, State of Nevada bounded and described as follows:

## TOWNSHIP 29 NORTH, RANGE 48 EAST, M.D.B.&M. Section 21: NE1/4

EXCEPTING THEREFROM all petroleum, oil, natural gas and products derived therefrom lying in and under said land, as reserved by Southern Pacific Land Company, in deed recorded in Book 24, Page 168, Deed Records, Eureka County Nevada.

Together with all and singular hereditament and appeurtenances thereunto belonging or in any way appertaining to. In Witness Whereof, We have hereunto set our hands on // - /6 2010.

Signature of Grantor

STATE OF MONTANA COUNTY OF MISSOULA

This instrument was acknowledged before me on NOVFINBER 16, 2010

STEPHEN S. ELLIS + DOUCLAS S. HADNOT

Notary Public

My Commission expires: 6/24/244.

Signature of Grantor

DONNA CARAS NOTARY PUBLIC for the State of Montana Residing at Missoula, MT My Commission Expires

June 24, 2014.

## STATE OF NEVADA DECLARATION OF VALUE

,	FOR RECORDERS OF HUNAL USE UNLT
1. Assessor Parcel Number (s)	Document/Instrument#: 02/6/18
1. Assessor Parcel Number (s) a) 005-410-05	Book: 5/0 Page: 2
b)	Date of Recording: 11-19-10
c)	Notes: Retirement plan presented
d)	4 351
	Ju
2. Type of Property:	\ \
a) Vacant Land b) Single Fam R	es.
c) Condo/Twnhse d) 2-4 Plex e) Apt. Bldg. f) Comm*//Ind*	~ \ \
e) Apt. Bidg. () Continuing () Agricultural () Mobile Home	
i) Other	
	1 2 1
3. Total Value/Sales Price of Property:	\$ No Consideration
Deed in Lieu of Foreclosure Only (value of property)	5
Transfer Tax Value:	\$
Real Property Transfer Tax Due:	\$
4. If Exemption Claimed:	41 01 - 071 14
4. If Exemption Claimed:  a. Transfer Tax Exemption, per NRS 375.090, Section:	Il Chance of Identify
h Evoluin Waason Int HYPMORDD / /// 3 / 1 & 7 / /	ENGLIST STREET, BUCK LEAVING ALL STREET
to myself, personally and for #7	Transfer from a trust
a a sur to the second s	100 % without considera
5. Partial Interest: Percentage being transferred:	700 10
The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060	
The undersigned deciales and deviation provided is entroof to the best of their information and	
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	
belief, and can be supported by documentation it called t	upon to substantiate the information
provided herein. Furthermore, the disallowance of any c	laimed 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.	
and the state of t	
Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any	
additional amount owed	
Signature Jugue Stonding	Capacity Trus TEE
Signature Pouglas I booknot	Capacity Grantec
Signature 102 1 2	
OF LED CODANTOD INCODMATION RI	IYER (GRANTEE) INFORMATION
<u> </u>	(PEOL #PEOL
Print Name: DOUGLAS SHAJNO! TrusteePrint	
3-1-1	ress: Po Box 27X
City: Loub City:	
State: <u>m7</u> Zip: <u>59847</u> State	e: <u>m7</u> Zip: <u>59847</u>
/	
COMPANY/PERSON REQUESTING RECORDING	
(REQUIRED IF NOT THE SELLER OR BUYER)	n//A-
Print Name: DOUBLAS S. HADNOT	Escrow# /V / /
Address: PO Buy 278	
City: $\angle 0 \angle 0$ State:	M7 Zip: 59847

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)



## STATE OF NEVADA DECLARATION OF VALUE

FOR RECOR 1. Assessor Parcel Number (s) Document/Ins Recording requested By D S HADNOT DDS a) 005-410-05 Book. Date of Recor Eureka County - NV Notes: Mike Rebaleati - Recorder Page 1 of 2 Fee: \$14,00 Recorded By FES 2. Type of Property: Book-510 Page-0002 Vacant Land Single Fam Res. Condo/Twnhse 2-4 Plex Apt. Bidg. CommVind1 Mobile Home **Agricultural** Consideration 3. Total Value/Sales Price of Property: S Deed in Lieu of Foreclosure Only (value of property) Transfer Tax Value: \$ Real Property Transfer Tax Due: S 4. If Exemption Claimed: a. Transfer Tax Exemption, per NRS 375.090, Section: # / CHANGE OF IDENTIF b. Explain Reason for Exemption: This is a transfer from my retirement plan to myself, personally. Transfer from and lor without runsideration 5. Partial Interest: Percentage being transferred: 100 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. Capacity Trustee
Capacity Grantee ➤ Signature <sup>∨</sup>Signature 🥭 SELLER (GRANTOR) INFORMATION **BUYER (GRANTEE) INFORMATION** (REQUIRED) (REQUIRED) Print Name: Stephen S EllK TrustEE Print Name: Stephen Tayhawk Lunz Address: Address: 1-lamiltor City: City: State: Zip: 59840 State:

Escrow#

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)

COMPANY/PERSON REQUESTING RECORDING

DOUGLAS S HADNOT

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: Address: City: