

DOC # 0218508

09/02/2011

01:51 PM

Official Record

Recording requested By
SANDRA WHITELEY-DULGAR

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT: \$3.90

Recorded By: FES

Book- 520 Page- 0384



0218508

THE ABOVE SPACE PROVIDED FOR RECORDERS USE ONLY

PREPARED BY:

Sandra Whiteley-Dulgar
PO Box 111
Nezperce, Idaho 83543

PARCEL NUMBER: 005-420-20

WHEN RECORDED RETURN TO:

David M. Raynor
PO Box 111
Nezperce, Idaho, 83543

QUIT CLAIM DEED

August 25, 2011 THE GRANTOR(S),

- Sandra Whiteley - Dulgar, a single person,
for and in consideration of: One Dollar (\$1.00) and other good and valuable consideration
conveys, releases and quit claims to the GRANTEE(S):

- David M. Raynor, 102 Birch Street, Nezperce, Lewis County, Idaho, 83543,
the following described real estate, situated in the County of Eureka County, State of Nevada:

(legal description): Township 29 North, Range 48 East, M.D.B. & M. Section 1: SW 1/4 NE 1/4
SE 1/4

Description is as it appears in Document No. 67938, Official Records, Eureka County County,
Nevada.

Grantor does hereby grants, bargain and sell all of the Grantor's rights, title, and interest in and to
the above described property and premises to the Grantee(s), and to the Grantee(s) heirs and
assigns forever, so that neither Grantor(s) nor Grantor's heirs, legal representatives or assigns shall

have, claim or demand any right or title to the property, premises, or appurtenances, or any part thereof.

Tax Parcel Number: 005-420-20

Mail Tax Statements To:
David M. Raynor
PO Box 111
Nezperce, Idaho 83543

Grantor Signatures:

DATED: 8/26/11

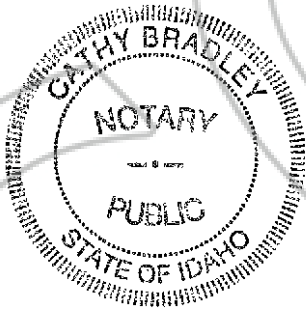
Sandra Whiteley - Dulgar

Sandra Whiteley - Dulgar
102 Birch Street
Nezperce, Idaho, 83543

STATE OF IDAHO, COUNTY OF LEWIS, ss:

On this 26th day of August, 2011, before me,
Cathy Bradley, personally appeared Sandra Whiteley - Dulgar,
known to me (or satisfactorily proven) to be the persons whose names are subscribed to the
within instrument and acknowledged that they executed the same as for the purposes therein
contained.

In witness whereof I hereunto set my hand and
official seal.



Cathy Bradley
Notary Public

Notary Public
Title (and Rank)

My commission expires 12-30-2014

Notary Address:
Craigmont, Idaho

STATE OF NEVADA
DECLARATION OF VALUE

Recording requested By
SANDRA WHITELEY-DULGAR

Eureka County - NV

FOR
Doc:
Book
Date
Notes:

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Page 1 of 1 Fee: \$15.00
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- 1. Assessor Parcel Number (s)
- a) 005-420-20
- 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:

Deed in Lieu of Foreclosure Only (value of property) _____

Transfer Tax Value: _____

Real Property Transfer Tax Due: _____

\$ 960.00

\$ 3.90

\$ _____

\$ _____

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 Sandra Dulgar (Whiteley) Capacity owner

Signature _____ Capacity buyer

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Sandra Dulgar

Address: PO Box 111

City: Nezperce

State: Id Zip: 83543

(REQUIRED)

Print Name: David M. Raynor

Address: PO Box 111

City: Nezperce

State: ID Zip: 83543

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: [Signature] Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____