

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO

Dorothea M. Rowe
P.O. Box 414
Caliente, NV 89008

Title Order No. _____ Escrow No. _____

097325

FILED AND RECORDED AT REQUEST OF
United NV Business & Estate
Sept. 3, 1991

At 1 MINUTES PAST 1 O'CLOCK
P.M. RECORDED 98 OF OFFICIAL
RECORDS, PAGE 111 LINCOLN
COUNTY, NEVADA.

Frank S. [Signature]
COUNTY CLERK

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ _____
 computed on full value of property conveyed, or
 computed on full value less value of liens and encumbrances remaining at the time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

Dorothea M. Rowe, a married woman as her sole and separate property

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, does hereby remise,

release and forever quitclaim to The Rowe Trust, dated June 20, 1991, Dorothea M. Rowe, Trustor and/or Trustee

the following described real property in the City of Caliente
County of Lincoln, State of ~~NEVADA~~ NEVADA

Lot three (3) in Block "A" of the James H. Gottfredson addition to the City of Caliente, County of Lincoln, State of Nevada, as shown on the map thereof recorded August 9, 1963 under document NO. 40599, Lincoln County, Nevada records.

Assessor's parcel No. 03-131-19

Executed on June 20, 1991, at Caliente, Nevada

Dorothea M. Rowe
Dorothea M. Rowe

STATE OF ~~NEVADA~~ NEVADA } ss.
COUNTY OF Lincoln

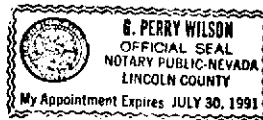
On this 20th day of June, in the year 1991, before me, the undersigned, a Notary Public in and for said State, personally appeared

Dorothea M. Rowe

_____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name _____ is subscribed to the within instrument, and acknowledged to me that she executed it.

WITNESS my hand and official seal.

[Signature]
Notary Public in and for said State



(This area for official notarial seal)

MAIL TAX STATEMENTS TO _____
NAME _____ ADDRESS _____ ZIP _____