

65

RECORDING REQUESTED BY

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

NAME Martha M. Lauritzen, Trustee  
STREET ADDRESS P.O. Box 58  
CITY, STATE & ZIP CODE Pioche, NV 89043  
TITLE ORDER NO. ESCROW NO.

104716-

RECORDED AT REC'D AT  
Martha Lauritzen  
January 26, 1996  
P. 20 MINUTES PAST 3 O'CLOCK  
P. 117 OF 1  
RECORDS PAGE 222 LINCOLN  
COUNTY NEVADA

By Yuriko Setzer  
By Ledie Boucher deputy  
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 liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax Firm Name

Barbara J. Preston

(NAME OF GRANTOR(S))

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

release and forever quitclaim to The Martha M. Lauritzen Revocable Trust dated May 26, 1994

(NAME OF GRANTEE(S))

the following described real property in the City of Pioche Martha M. Lauritzen, Trustee

County of Lincoln State of Nevada

Block #34, Lot 26, As recorded in the County Recorder's office of Lincoln County.

Assessor's parcel No. 1-074-03 - Roll-01963

Executed on January 23, 1996, at Bishop, California

(CITY AND STATE)

Barbara J. Preston  
Barbara J. Preston

STATE OF CALIFORNIA

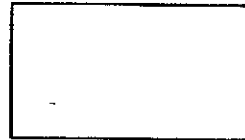
COUNTY OF INYO

On 1-24-96 before me, JERRY M. CORE

(NAME/TITLE, IF JANE DOE, NOTARY PUBLIC)

personally appeared BARBARA J. PRESTON  
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- INDIVIDUAL(S)
- CORPORATE OFFICER(S)
- PARTNER(S)
- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER

SIGNER IS REPRESENTING:

(NAME OF PERSON(S) OR ENTITY/ES)



WITNESS my hand and official seal.

Jerry M. Core  
(SIGNATURE OF NOTARY)

MAIL TAX STATEMENTS TO:

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.

