A 298-10 R 298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 20 thlay of August

(year),2001

by first party, Grantor, Barbara J. Meson

whose post office address is P.O. Box 4, Pioche, Nevada 89043

to second party, Grantee, Jerry C. Coorbes and Barbara J. Meson JIWROS

whose post office address is P.O. Box 4. Pioche, Nevada 89043

WITNESSETH, That the said first party, for good consideration and for the sum of

One Dollars (\$1.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of Lincoln , State of Nevala to wit:

Lots 55,56,57,858 in Block 23 in Pioche Township ARN 1-122-22

(1).

AHAA
This product does not constitute the rendering of legal advice or services. This product is intended for informational use only and is not a substitute for legal advice. State laws vary, so consult an attorney on all legal matters. This product was not necessarily prepared by a persun licensed to practice law in this state.

Il your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

FILED AND RECORDED AT REQUEST OF

AT MURITIS PEST DECISION

AT MURITIS PEST DECISION

BECOME THE CONTRACTOR

COMMITT RECORDER

POC on Till and

BASK 157 MAE 367

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State of Nevada	
Declaration of Value	
1. Assessor Parcel Number(s) 4)	
2. Type of Property:	FOR RECORDERS OPTIONAL USE ONLY
a) Vacant Land b) □ Single Fam. Res. c) □ Condo/Twnhse d) □ 2-4 Plex e) □ Apt. Bldg. f) □ Comm1/Ind1 g] □ Agricultural h) □ Mobile Home Other	Document/Instrument #
3. Total Value/Sales Price of Property:	i Lood
Deduct Assumed Liens and or Encumbrances:	\ \ \
(Provide recording information: Doc/Instrume	nt #: Book: Page:)
Transfer Tax Value per NRS 375.040, Section 2: Real Property Transfer Tax Due:	* \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
4. If Exemption Claimed:	.45
a. Transfer Tax Exemption, per NRS 375,090, Section))
b. Explain Reison for Exemption:	aline las One
	for song.
5. Partial Interest: Percentage being transferred:	/ /
called upon to substantiate the information provided herein. Further other determination of additional tax que, may result in a penaity on NRS 375,030, the Buyer and Seller shall be jointly and sev	acknowledges, under benalty of perjury, pursuant to NRS 375.060 and their marmation and belief, and can be supported by documentation if more the parties agree that disallowance of any claimed exemption, or of 10% of the tax due plus interest at 1.1/2% per month. Pursuant to erally liable for any additional amount owed.
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
Seller Signature: Roybasso (Mason Print Name: Machan J. MASON	Euver Signature:
Print Name: YARDARA I. MASOKI Address: £0. Bo V V	Frant Name:
City: Flooh	Address;
State: NV Zip: 890 43	City: Zip: Zip:
Telephone: (77) 962-5376	Telephone: ()
Capacity:	Capacity:
Co. Name:	STING RECORDING
	ESC. #:

Lincoln County

IN WITNESS WHEREOF, The said first parwritten. Signed, sealed and delivered in presen	ity has signed and sealed these presents the day and year first above ee of:
Kath C Diah Signature of Witness Kath C Niath Print name of Winess	- Berbona Massoen Signature of First Party
KATHY C NIATT	Signature of First Party BARDARA J. MASOLY Print name of First Party
ignature of Witness	Signature of First Party
rint name of Witness	Print name of First Party
uthorized capacity(ies), and that by his/her/th	ne hasis of satisfactory evidence) to be the person(s) whose name(s) knowledged to me that he/she/they executed the same in his/her/their cir signature(s) on the instrument the person(s), or the entity upon
rnan or which the person(s) acted, executed the ATNESS my hand and official seal.	e instrument.
ignature of Notary	Affiant Known Produced ID
rate subscribed to the whall instrainent and ac-	TRISTA FOGE MANE ANALYTHE STATE ALEXANT Lincoln Courty - Newada CERTIFICATE # 97-1213-11 APPT. EXP. MAY 2, 2005 The basis of satisfactory evidence) to be the person(s) whose name(s) knowledged to me that he/she/they executed the same in his/her/their eir signature(s) on the instrument the person(s), or the entity upon e instrument.
gnature of Notary	AffiantKnownProduced ID Type of ID
	(Seal)
	Signature of Preparer
	Print Name of Preparer
	Address of Preparer
If your state requires 8 1/2" x 11" fo	rms, cut off the bottom of this page at the dotter of the bottom of this page.
/ /	FILED AND RECORDED TA DESCRIPTION
/ /	BARBARA MASON
	AUGUST 17. 2001
	AT_15_DENTITIES AS _4_ GOLOCK
	PM Merck 157 of official recognition 367 direction
	COUNTY NEWADA
	John fortchy -

.acox 157 me 369

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