A 298-10 R 298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 20th day of August by first party, Grantor, Jerry C. Coombes and Barbara J. Mason whose post office address is P.O. Box 4, Pioche, Nevada 89043 to second party, Grantec, Charles E. Coombes whose post office address is 5202 Long Boat Blvd., Tampa, FL 33615

WITNESSETH, That the said first party, for good consideration and for the sum of Zero Dollars (\$.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 Nevada to with

Parcel No.46 as shown on Parcel Map For James Vincent, filed in the office of the County Recorder of Lincoln County on March 8,1999 in Book B, Page 191, of Plats, as File No. 112427, and Certificate of Amendment recorded March 17, 1999 in Book B, Page 198 A/B of Plats as File No. 112464, located in a portion of NE 1/4 Section 15, T. 1 North, R. 67 East, M.D.B.&M., Lincoln County,

APN 001-341-13

(1)

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 lows vary, so convoit an attorney on all legal matters. This product was not necessarily prepared by a person licensed to practice law in this state.

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

2001 (year).

IN WITNESS WHEREOF, The said first party	
written. Signed, scaled and delivered in presence	y has signed and scaled these presents the day and year first above
. D A OI	
Signature of Witness	Figuratory First Party
Jor A. Cheeney	VERRY C LOUIDEC
Print name of Witness	Print name of First Party
- Mion Kaulier	
Signature of Witness	Berbara Mason Signature of First Party
fillson boucher	- DARPARA S. MASON
The foliation of trieness	Print name of First Party
State of Neuman County of Lincoln	
On August 27, 2001 hefore me	
personally known to me (or proved to me on the	basis of satisfactory evidence) to be the person(s) whose name(s) toweldged to me that he/she/they executed the came is higherable in
authorized capacity(ies), and that by his/her/their	C Signatura(e) on the instrument of a second rice since in any nervincing
behalf of which the person(s) acted, executed the WITNESS my hand and official seal.	instrument.
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State of NV	(Scal)
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State of Nevada	
Declaration of Value	
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1. Assessor Parcel Number(s) a)	
b)	< 1
c)d)	
2. Type of Property:	FOR RECORDERS OPTIONAL USE ONLY
a) 🖄 Vacant Land b) 🖸 Single Fam. Res.	Document/Instrument# 11(08(03
e) ☐ Apr. Bldg. d) ☐ 2-4 Plex e) ☐ Apr. Bldg. 1 ☐ Comm1/Ind1	Benck: 157 Page: 5210-537
g) 🔾 Agricultural h) 🗆 Mobile Home	Date of Recording: Uring 27, 2001
5. Total Value/Sales Price of Property:	100
Deduct Assumed Liens and/or Encumbrances:	· / / / / / / / / / / / / / / / / / / /
(Provide recording information: Doc/Instrument #	
Transfer Tax Value per NRS 375,010, Section 2:	Book: Page:)
Real Property Transfer Tax Due:	
If Exemption Claimed: □ If Exemption Claimed:	
a. Transfer Tax Exemption, per NRS 375,090. Section: #	! 4
b. Explain Reason for Exemption:	_/_/
S. Donald France D.	/_/
5. Partial Interest: Percentage being transferred:	
The undersigned Seller (Grantor)/Suyer (Grantee), declares and acknown NRS 375.110, that the information provided is correct to the best of their called upon to substantiate the information provided herein. Furthermore	owiedges, under penalty of perjury, pursuant to NRS 375,060 and
other determination of additional to a provided herein. Furthermore	the parties agree that disallowance of any claimed examined
inno 375,030, the Buyer and Seller shall be jointly and severall	y liable for any additional amount owed.
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
Protological December 11 and 12 and 1	uyer Signature: Mes lea Coon bon
Address: Do 12	rint Name: (hAR BSE. Coombes
	odress: Sacra Loadon of DR
State: Zip: 84887	ate: Zio:
Telephone: () <u>962-5376</u> Te	elephone: ()
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Co. Name:	
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