FILED FOR REDURATING
AT THE REQUEST OF

Earl Monsey
2007 PAR 18 FM 1 19

LETTER ADDITION DEPTO

ASSESSOR'S PARCEL NO. 011-191-03

QUITCLAIM DEED

The South Half (S 1/2) of the Northwest Quarter (NW1/4) of the Northwest Quarter (NW 1/4) of Section 31. Township 6 South. Range 61 East

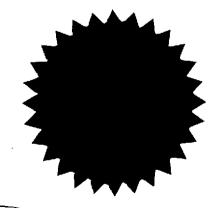
THE EDWARD WEINSTEIN AND SUSAN WEINSTEIN

LIVING TRUST DATED NOVEMBER 1. 1991

EDWARD WEINSTEIN

Trustee

RETURN TO: DAVID MORGAN, LLC 8170 West Sahara Avenue, Suite 202 Las Vegas, Nevada 89117



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STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number(s) a)	
2. Type of Property:	FOR RECORDERS OPTIONAL USE ONLY
a) Vacant Land b) Single Fam. Res.	Document/Instrument #: 12/9(25
c) Condo/Twnhse d) 2-4 Plex	Book 184 Page: 283
e) Apt. Bidg f) Comm'l/Ind'i g) Agricultural h) Mobile Home	Date of Recording:
g) Agricultural h) Mobile Home Other	Notes.
3. Total Value/Sales Price of Property \$	0
Deed in Lieu of Foreclosure Only (value of property) (
Transfer Tax Value: \$	
Real Property Transfer Tax Due	
 4. If Exemption Claimed: a. Transfer Tax Exemption per NRS 375.090, Section 	8
	to a business entity of which
nante is 100% of	
5. Partial Interest: Percentage being transferred: 100	
	` ' /
The undersigned declares and acknowledges, under and NRS 375.110, that the information provided is correct to supported by documentation if called upon to substantiate to disallowance of any claimed exemption, or other determinate penalty of 10% of the tax due plus interest at 1% per month shall be jointly and severally liable for any additional amount	o the best of their information and belief, and can be the information provided herein. Furthermore, the tion of additional tax due, may result in a n. Pursuant to NRS 375.030, the Buyer and Seller
Signature Carl Won	Capacity attorner
Signature	Capacity
	-
OF LED YOR ANTOD INCODERATION	BUYER (GRANTEE) INFORMATION
SELLER (GRANTOR) INFORMATION (REQUIRED)	(REQUIRED)
Print Name: Neinstein Trust	Print Name: David Morgan LLC
Address: 8170 N. Schan Rive.	Address: 8170 W. Sahara ave.
City: Las Vegas	City: Sos Vecas
State: N Zip: 89117	State: W Zip: 89117
	•
COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)	
Print Name:	Escrow #
Address: State:	Zip:
City: State:	Δ1γ.
(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)	