

125132

APN: 01-072-08 / 01-331-02
Recording requested by and mail documents and tax statements to:

FILED FOR RECORDING
AT THE REQUEST OF

Name: GEORGE J. BENDINSKIS
Address: P.O. Box 55
City/State/Zip: PiOCHe, NV 89043

George J. Bendinski's
2005 SEP 2 AM 9 21

LINCOLN COUNTY RECORDER
FEE 15.00 DEP cu
LESLIE BOUCHER

DED104
Nevada Legal Forms & Books, Inc. (702) 870-8977
www.legalformsrus.com

RPTT: _____ **QUITCLAIM DEED**

THIS INDENTURE WITNESS That the GRANTOR(S): LORRAINE A. Di FELICE
P.O. Box 14446, LAS VEGAS, NV 89114

for and in consideration of _____ Dollars (\$ _____)

do hereby QUITCLAIM the right, title and interest, if any, which GRANTOR may have in all that real property, the receipt of which is hereby acknowledged, to the GRANTEE(S):

GEORGE J. BENDINSKIS, P.O. Box 55, PiOCHe, NV 89043

all that real property situated in the City of PiOCHe

County of LINCOLN, State of NEVADA

bounded and described as follows: (Set forth legal description and commonly known address)

MT. VIEW HOTEL - 01-072-08 LOTS 11, 12, 13 BLOCK 35
20 ACRES - 01-331-02 W 1/2 SW 1/4 NW 1/4
SECT. 10 TOWNSHIP RANGE 67 E

WARNING: THE COUNTY RECORDER MAY CHARGE AN ADDITIONAL FEE IF YOU WRITE WITHIN THE 1" MARGINS OF THIS DOCUMENT OR VIOLATE ANY OTHER RECORDING REQUIREMENTS IMPOSED BY YOUR COUNTY RECORDER.

Together with all and singular hereditament and appurtenances thereunto belonging or in any way appertaining to.

In Witness Whereof, I/We have hereunto set my hand/our hands on 1 day of SEPT, 20 05.

Lorraine A. DiFelice
Signature of Grantor

Signature of Grantor

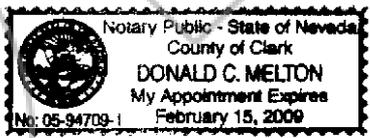
LORRAINE A. DiFELICE
Print or Type Name Here

Print or Type Name Here

STATE OF NEVADA)
COUNTY OF CLARK)

On this 1 day of SEPTEMBER, 20 05, personally appeared before me, a Notary Public LORRAINE A. DiFELICE personally known to me to be the person(s) whose name(e) is subscribed to the above instrument who acknowledged that She executed this instrument. Witness my hand and official seal.

Donald C. Melton
Notary Public
My commission expires: 2-15-2009
Consult an attorney if you doubt this forms fitness for your purpose.



State of Nevada Declaration of Value

1. Assessor Parcel Number(s)

- a) 01-072-08/p1-331-02
- b) _____
- c) _____
- d) _____

2. Type of Property

- a) Vacant Land
- b) Single Family Res.
- c) Condo/Townhouse
- d) 2-4 Plex
- e) Apartment Building
- f) Commercial /Ind'l
- g) Agriculture
- h) Mobile Home
- i) other _____

FOR RECORDERS OPTIONAL USE ONLY	
Document / Instrument #	<u>125132</u>
Book: <u>206</u>	Page: <u>13-14</u>
Date of Recording:	<u>9/2/05</u>
Notes:	_____

- 3. Total Value / Sales Price of Property \$ _____
- Deed In Lieu Only (value of forgiven debt) \$ _____
- Taxable Value \$ _____
- Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, section: #e
- b. Explain Reason for Exemption: transfer from ex-wife

5. Partial Interest: Percentage being transferred: _____ %

The undersigned Seller (Grantor)/Buyer (Grantee), declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the parties agree that disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1 1/2% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature _____ Capacity _____

Signature George Bendinski Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name George Bendinski
 Address Box 55
 City Pioche
 State Nev Zip 89043

Print Name Horraine A. Di Felice
 Address P.O. Box 1446
 City LV Nev
 State Nev Zip 89043

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT BUYER OR SELLER)

Co. Name _____ Esc. # _____
 Address _____
 City _____ State: _____ Zip _____

(As a public record, this form may be recorded / microfilmed)