	FILED FOR RECORDING			
APN: (23/8//3	AT THE REQUEST OF :			
Recording requested by and mail documents and tax statements to:	Beriford Sanders			
Name: 10ste Kol LLC	2008 MAY 5 PM 1 07			
Address: 7294 Dig Cak Circle	LINCOL I COUNTY DE			
Address: 733 4 Nig Cak Cir. c/se City/State/Zip: 6-18-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	FEE \$ 15 CO NIZE SCREEN LESLIE BOUCHER ACE			
DED104	2000 NE. (108)			
Nevada Legal Forms & Books, Inc. (702) 870-8977 www.legalformsrus.com				
RPTT: QUITCLAIM DEED				
THIS INDENTURE WITNESS That the GRANTOR(S): Deutoral Sanders				
for and in consideration of Jun differs				
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): 10525 Rel 110				
720+ Big Oak Circle San Vigan Vu 89/08				
all that real property situated in the City of				
County of Jenroln State of Neuralie				
bounded and described as follows: (Set forth legal description and commonly known address)				
fat (12) in Black Nine (9) of The City				
Of Caliente as shown by map Thereof on File				
in The office of the County Recorder of fincoln				
County Novada.				
Commonly Known as 147 Clover ST.				
Caliente No				
THE DAY OF THE DAY OF THE PARTY				
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.				

Quitclaim Deed

Page 1 of 2

Initials <u>15</u>

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 5 day of 7/4 \\ 20 0 0 \\ Signature of Grantor Signature of Grantor Signature of Grantor Print or Type Name Here
STATE OF Nevada) COUNTY OF Lincoln)
On this 5th day of Mouy . 20 Ob , personally appeared
before me, a Notary Public Bel. for d. Sander S
personally known to me to be the person(s) whose name(e) is subscribed to the above instrument
who acknowledged thathe executed this instrument. Witness my hand and official seal.
Notary Public My commission expires: 10.608 Consult an attorney if you doubt this forms fitness for your purpose.

Quitclaim Deed

Page 2 of 2

Initials A

State of Nevada Declaration of Value

1. Assessor Parcel Number(s)			^
a) (' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			/\
			\ \
c)			\ \
d)			
2. Type of Property	,		ORDERS OPTIONAL USE ONLY
	b) Single Family Res.	Document / Inst	rument # 124471
/ ==	d) 2-4 Plex	Book: 🔍 ।	(Page: -2(3)
	f) Commercial /Ind'l	Date of Reco	ording: 11 (44 5, -2006
g) Agriculture i) other	h) Mobile Home	Notes:	<u> </u>
i) Li oulei			
3. Total Value / Sales Price of Property	s .20	,c28	
Deed In Lieu Only (value of forgiver			
Taxable Value	\$		
Real Property Transfer Tax Due:	s	780€	
	(
	DC 275 000 sections	\ /	/
a. Transfer Tax Exemption, per N		$\overline{}$	
b. Explain Reason for Exemption:			
		\ <u> </u>	
5 Destini Intercet Description being trongfor	modu 0/	/ (
5. Partial Interest: Percentage being transfe	rred:	/ /	
The undersigned Seller (Grantor)/Buyer (Grantee),	declares and acknowledges, unde	r penalty of penjury, pursu	ant to NRS 375.060 and NRS 375.110,
that the information provided is correct to the best of the information provided herein. Furthermore, the parties ag	sir information and belief, and car	n be supported by documer ned exemption, or other de	tation if called upon to substantiate the termination of additional tax due, may result in a
penalty of 10% of the tax due plus interest at 1 1/2% per i	month. Pursuant to NRS 375.036	0, the Buyer and Seller st	all be jointly and severally liable for any
additional amount owed.	ii .	. \	~
additional amount owed. Signature Adams Sunce	·	Capacity	
Signature		Capacity	
SELLER (GRANTOR) INFO	RMATION	/ / BU	YER (GRANTEE) INFORMATION
		/ /	
Print Name Rey Sold Som	V175	Print Name $\angle CS$	
Address BC Bex 846		Address 7.269	
		City $\delta a = 0$	
City / Jane / Zip 8 300/		State 12	Zip <u> </u>
State Zip 3 2 2	2	State	
\)		
COMPANY/PERSON REC	OUESTING RECORDING	G (REQUIRED IF NO	T BUYER OR SELLER)
	/		
Co. Name	/	Esc. #	
Address		State:	Zip
City		State	

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