



Recording requested by: Dan C. POE
When recorded, mail to:

Name: Dan C. POE
Address: PO Box 690
City: Pioche
State/Zip: Nevada 89043

Space above reserved for use by Recorder's Office

Document prepared by:
Name Ernest H KASOLD II
Address P.O. Box 629
City/State/Zip Pioche, Nevada 89043

Property Tax Parcel/Account Number: Portion of 005-231-40

QUITCLAIM DEED

This Quitclaim Deed is made on 20 March 2007, between
D. KASOLD
Ernest H. KASOLD II & Deanna, Grantor, of 100 E. Mt. Wilson Rd.,
City of Pioche, State of Nevada, and
Dan C. POE & Julia S. POE, Grantee, of 100 S. Pinon Pine Rd.,
City of Pioche, State of Nevada.

For valuable consideration, the Grantor hereby quitclaims and transfers all right, title, and interest held by the Grantor in the following described real estate and improvements to the Grantee, and his or her heirs and assigns, to have and hold forever, located at 100 S. Pinon Pine Rd.,
City of Pioche, State of Nevada:

(5.02 acreage, a portion of Parcel Number 005-231-40 designated as Parcel B2)
as recorded in Book C Page 0320 of Parcel Map dated 19 March 2007

Subject to all easements, rights of way, protective covenants, and mineral reservations of record, if any. Taxes for the tax year of 2007 shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

Dated: 20 March 2007

Ernest H. Kasold II Deanna D. Kasold
Signature of Grantor

Ernest H. Kasold II
Ernest H. KASOLD II and Deanna D. KASOLD
Name of Grantor

[Signature]
Signature of Witness #1

Lisa C. Lloyd
Printed Name of Witness #1

Melanie K. McBride
Signature of Witness #2

MELANIE K. MCBRIDE
Printed Name of Witness #2

State of Nevada County of Lincoln
On March 20, 2007, the Grantor, Ernest H. Kasold II and Deanna D. Kasold
personally came before me and, being duly sworn, did state and prove that he/she is the person described in the above document and that he/she signed the above document in my presence.

[Signature]
Notary Signature



Notary Public,
In and for the County of Lincoln State of Nevada

My commission expires: May 2, 2009 Seal

Send all tax statements to Grantee.

State of Nevada Declaration of Value

DOC # DV-129070
06/13/2007 11:51 AM
Official Record

Recording requested By
DAN C. POE

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$15.00
Recorded By: AE RPTT: \$117.00
Book- 232 Page- 0359

FOR RECORDERS OFICIAL USE ONLY

Document / Instrument # _____
Book: _____ Page: _____
Date of Recording: _____
Notes: _____

1. Assessor Parcel Number(s)
a) Portion of 005-231-40 (B2)
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 _____

3. Total Value / Sales Price of Property \$ 30,000.00
Deed In Lieu Only (value of forgiven debt) \$ _____
Taxable Value \$ _____
Real Property Transfer Tax Due: \$ 117.00

4. If Exemption Claimed:
a) Transfer Tax Exemption, per NRS 375.090, section: _____
b) Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: 100 %

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 Ernest H. Kasold II Capacity Grantor

*Signature _____ Capacity Grantee

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

* Print Name Ernest H. KASOLD II
Address P.O. Box 629
City Pioche, NV 89043
State Nevada Zip 89043

* Print Name Dan C. POE
Address P.O. Box 690
City Pioche, NV 89043
State Nevada 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)