

APN'S: 004-141-04 and 004-141-26

Mail Tax Statements to and
When Recorded, Mail to:
JACK L. LEASON and
MARSHA SCOFIELD-LEASON, Trustees
7840 Villa Finestra Drive
Las Vegas, NV 89128

QUITCLAIM DEED

THIS INDENTURE WITNESSETH: That MARSHA SCOFIELD-LEASON, without consideration, does hereby Remise, Release and forever Quitclaim to JACK L. LEASON and MARSHA SCOFIELD-LEASON, Trustees of LEASON FAMILY TRUST, dated February 20, 2002, as amended, or restated, or their successors, all of her right, title and interest in that real property situated in the County of Lincoln, State of Nevada, bounded and described as follows:

See Exhibit "A" attached for legal description and by this reference incorporated herein.

SUBJECT TO: Powers of Trustees attached hereto as Exhibit "B" and by this reference incorporated herein.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in any wise appertaining.

Witness her hand this 24th day of January, 2003.

Marsha Scofield-Leason
MARSHA SCOFIELD-LEASON

STATE OF NEVADA)
) ss.
COUNTY OF CLARK)

On this 24th day of January, 2003, before me the undersigned, a Notary Public in and for the said State, personally appeared MARSHA SCOFIELD-LEASON, known to me to be the person whose name is subscribed to the within instrument and acknowledged that she executed the same.

WITNESS my hand and official seal.

Jennifer Racker
Notary Public



EXHIBIT "A"

That portion of the North half (N 1/2) of Section 5, Township 7 South, Range 61 East, M.D.B.&M., described as follows:

Parcel Three (3) as shown on Parcel Map for Floyd R. Lamb and Eleanor Lamb recorded February 5, 1982, Plat 1, Page 189, File No. 7502 in the Office of the County Recorder of Lincoln County, Nevada.

EXHIBIT "B"
POWERS OF TRUSTEES

JACK L. LEASON and MARSHA SCOFIELD-LEASON, Trustees, are hereby vested with complete powers of disposition of the real Estate herein described, including the power to plat, sell, encumber, mortgage and convey as a whole or in parcels, and no person dealing with said Trustees shall be obligated to look beyond the terms of this instrument for power in the Trustees to sell, encumber, mortgage or convey, the real estate described herein.

Said Grantees are likewise hereby excused from any and all duties of diligence and responsibility respecting the propriety of any act of said Trustees purporting to be done under or by virtue of the terms of this issue.

This conveyance is made in Trust pursuant to and in accordance with the "LEASON FAMILY TRUST" which was executed on February 20, 2002.

119527
FILED FOR RECORDING
AT THE REQUEST OF
Kurt A. Johnson Esq
2002 FEB 24 PM 2 24
LINDSEY G. BOURGEOIS, CLERK
REC. CLERK
LESLIE BOURGEOIS

170 MAR 2002

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)
a) 0041-141-04
b) 0041-141-26
c) _____
d) _____

2. Type of Property:
a) Vacant Land
b) Single Fam. Res.
c) Condo/Townhse
d) 2-4 Plex
e) Apt. Bldg
f) Comm/Indl
g) Agricultural
h) Mobile Home
i) Other

FOR RECORDERS OPTIONAL USE ONLY
Document/Instrument #: 19527
Book 170 Page 261-266
Date of Recording: Feb. 24, 2003
Notes:

3. Total Value/Sales Price of Property \$ _____
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
b. Explain Reason for Exemption: Transfers without consideration to or from a Trust.
5. Partial Interest: Percentage being transferred: _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.090 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% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Kurt A. Johnson Capacity Attorney
Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED) BUYER (GRANTEE) INFORMATION (REQUIRED)
Print Name: Marsha Scofield-Lonsen Print Name: Marsha Scofield-Lonsen
Address: 7540 Villa Firenze Drive Address: 7540 Villa Firenze Drive
City: Las Vegas City: Las Vegas
State: NV Zip: 89128 State: NV Zip: 89128

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
Print Name: Kurt A. Johnson Escrow # _____
Address: 3321 N. Buffalo Dr. Ste. 200
City: Las Vegas State: Nevada Zip: 89129