

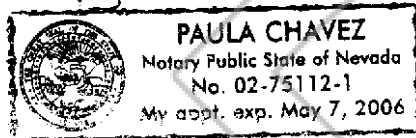


STATE OF NEVADA )  
 )ss.  
COUNTY OF CLARK )

I hereby certify that **ALICK J. MACKIE** whose names are signed to the foregoing conveyance, and who are known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this the 27<sup>th</sup> day of March, 2004.

Paula Chavez  
Notary Public  
My Commission Expires:



WHEN RECORDED MAIL TO:

**ALICK J. MACKIE and PHYLLIS M. MACKIE**  
928 San Gabriel Ave.  
Henderson, NV 89015-8962

MAIL TAX STATEMENT TO:

**ALICK J. MACKIE and PHYLLIS M. MACKIE**  
928 San Gabriel Ave.  
Henderson, NV 89015-8962

**STATE OF NEVADA  
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)  
 a) 13-110-07  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

2. Type of Property  
 a)  Vacant Land  
 b)  Single Fam. Res.  
 c)  Condo/Twnhse  
 d)  2-4 Plex  
 e)  Apt. Bldg  
 f)  Com'l/Ind'l  
 g)  Agricultural  
 h)  Mobile Home  
 Other \_\_\_\_\_

**FOR RECORDERS OPTIONAL USE ONLY**  
 Document/Instrument #: 122115  
 Book 185 Page: 93  
 Date of Recording: April 19, 2004  
 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 \$ \_\_\_\_\_ 0

**4. If Exemption Claimed:**

- a. Transfer Tax Exemption per NRS 375.090, Section 6  
 b. Explain Reason for Exemption: Transfer to or from a trust without consideration

5. Partial Interest: Percentage being transferred: 100 %

The undersigned 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% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Alick J. Mackie Capacity trustee  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

**SELLER (GRANTOR) INFORMATION  
(REQUIRED)**

Print Name: Alick J. Mackie, Trustee, The Alick J. Mackie Living Trust  
 Address: 928 San Gabriel Ave.  
 City: Henderson  
 State: NV Zip: 89015-8962

**BUYER (GRANTEE) INFORMATION  
(REQUIRED)**

Print Name: The Alick and Phyllis Mackie Living Trust, Alick J. Mackie and Phyllis M. Mackie, Trustees  
 Address: 928 San Gabriel Ave.  
 City: Henderson  
 State: NV Zip: 89015-8962

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**

Print Name: Secure Financial Benefits, LLC Escrow #: \_\_\_\_\_  
 Address: 10741 S. Dimple Dell Drive  
 City: Sandy State: UT Zip: 84092

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)