

RECORDING REQUESTED BY:
Fidelity National Lenders Solutions
Escrow No. 404046-KJT404046-404046
Title Order No. 2125955

FILED FOR RECORDING
AT THE REQUEST OF

First American Title
2004 MAY 27 PM 3 30

When Recorded Mail Document
and Tax Statement To:
Keith E Larson
59 Meadowlark Street
Caliente, NV 89008

LINCOLN COUNTY RECORDED
FEE 15.00
LESLIE BOUCHER

2125955
APN: 003-174-14

GRANT DEED

SPACE ABOVE THIS LINE FOR RECORDER'S USE

The undersigned grantor(s) declare(s)

Documentary transfer tax is \$ City Transfer Tax is \$

- computed on full value of property conveyed, or
- computed on full value less value of liens or encumbrances remaining at time of sale,
- Unincorporated Area City of Caliente

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Keith Larson and Judy E Larson, husband and wife as joint tenants

hereby GRANT(S) to Keith Larson, a married man as his sole and separate property

the following described real property in the City of Caliente,
County of Lincoln, State of Nevada:
SEE EXHIBIT ONE ATTACHED HERETO AND MADE A PART HEREOF

"This conveyance establishes sole and separate property of a spouse, R&T 11911."

DATED: May 20, 2004

STATE OF ^{IOWA} CALIFORNIA
COUNTY OF Pottawattamie
ON 5-20-2004 before me,
LINDA J GRIFFIS personally appeared
Keith Larson & Judy E. Larson

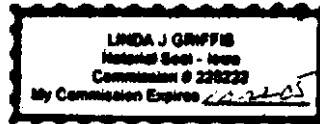
Keith Larson

Keith Larson

Judy E Larson

Judy E Larson

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



Witness my hand and official seal
Signature *Linda J. Griffis*

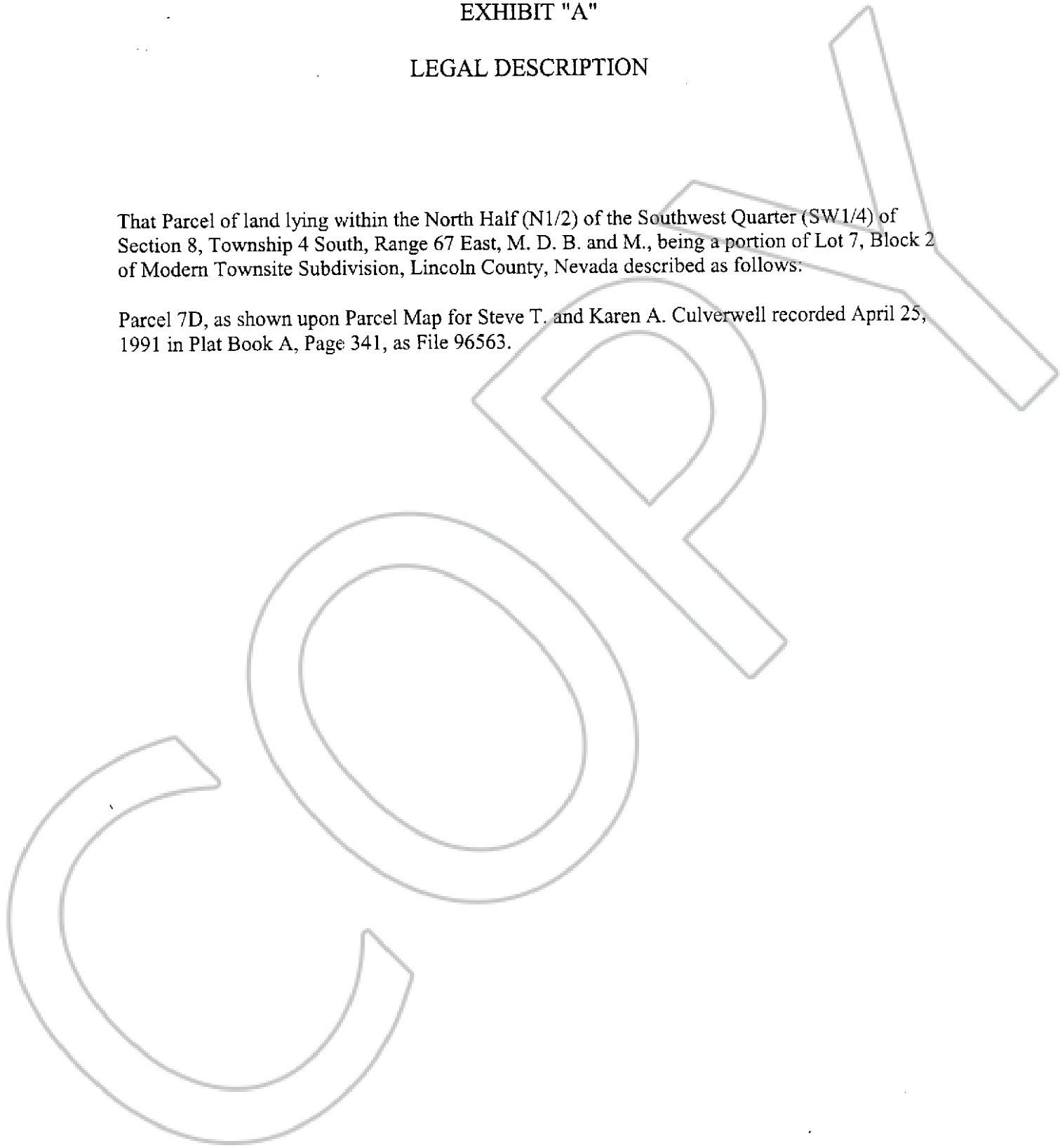
MAIL TAX STATEMENTS AS DIRECTED ABOVE

EXHIBIT "A"

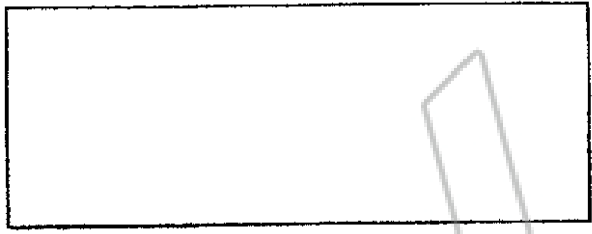
LEGAL DESCRIPTION

That Parcel of land lying within the North Half (N1/2) of the Southwest Quarter (SW1/4) of Section 8, Township 4 South, Range 67 East, M. D. B. and M., being a portion of Lot 7, Block 2 of Modern Townsite Subdivision, Lincoln County, Nevada described as follows:

Parcel 7D, as shown upon Parcel Map for Steve T. and Karen A. Culverwell recorded April 25, 1991 in Plat Book A, Page 341, as File 96563.



**STATE OF NEVADA
DECLARATION OF VALUE**



1. Assessor Parcel Number(s)
 a) 003-174-14
 b) _____
 c) _____
 d) _____
 e) _____

FOR RECORDERS OPTIONAL USE ONLY
 Document/Instrument #: 122401
 Book: 187 Page: 1
 Date of Recording: May 27, 2004
 Notes: _____

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

3. Total Value/Sales Price of the 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 85
 b. Explain Reason for Exemption: Remove Spouse

5. Partial Interest: Percentage being transferred: - %

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 Judy E. Larson Capacity Grantor
 Signature Keith E. Larson Capacity Grantee

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

Print Name: JUDY E. LARSON
 Address: 303 LINCOLN #1
 City, State, Zip: COUNCIL BLUFFS IA 51503

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

Print Name: KEITH E. LARSON
 Address: _____
 City, State, Zip: _____

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

Print Name: Fidelity National Title Agency of Nevada, Inc. Escrow #: _____
 Address: 500 N. Rainbow Blvd Suite 100
 City, State and Zip: Las Vegas, NV 89107

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