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FILED FOR RECORDING
AT THE REQUEST OF

APN: 011-120-15

John E. Lewis

2004 JUL 9 PM 4 14

WHEN RECORDED RETURN TO:

John E. Lewis, Attorney
625 Plumas Street
Reno, NV 89509

LINCOLN COUNTY RECORDER
FEE \$16.00 DEP
LESLIE BOUCHER LB

GRANTEE-Mail Tax Statements To:

Ash Springs, LLC
5045 Dolores Drive
Sparks, NV 89436

R.P.T.T #8 = 0

DEED

THIS INDENTURE made and entered into this 21st day of May, 2004, by and between D. CLAYTON WADSWORTH and MYRNA WADSWORTH, as Trustees of **THE WADSWORTH FAMILY TRUST**, a Revocable Living Trust, party of the first part, and **ASH SPRINGS, LLC**, a Nevada Limited Liability Company, party of the second part.

WITNESSETH:

That the party of the first part, without consideration to them paid by the party of the second part, do by these presents grant, bargain, sell and convey unto the party of the second part, and to its successors and assigns forever, all that certain real property situate in the County of Lincoln, State of Nevada, described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART
HEREOF.

TOGETHER with all and singular the tenements, hereditaments and

EXHIBIT "A"

A portion of that real property described as Lot One (1) covered by a deed recorded in the Lincoln County, Nevada, Recorder's office under document No. 19253, described as follows:

Commencing at a point along the West right of way of Highway 93, 1610 feet South of the Northeast corner of Section One (1), T6 S., R60E., MDB&M., and running thence southerly along the Highway right of way 500 feet, thence West 640 feet along the South border of said Lot One (1), thence Northerly 500 feet along the West border of said Lot One (1), thence East to Highway right of way or point of beginning and containing approximately seven and one third acres in Lot Three (3), in the Southeast quarter of the Northeast quarter (SE1/4, NE 1/4) of Section One (1), T6 S., R60 E., MDB&M.

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument#:	122613
Book:	188 Page: 216
Date of Recording:	July 9, 2004
Notes:	

1. Assessor Parcel Number (s)
 a) 011-120-15
 b) _____
 c) _____
 d) _____

2. Type of Property:
- | | | | |
|-----------------------------|--------------|----------------------------------------|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input checked="" type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input type="checkbox"/> | Other | | |

3. Total Value/Sales Price of Property: \$ 0
 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 or 8
 b. Explain Reason for Exemption: Transfer without consideration from Trust to limited liability company owned 100% by the trust

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 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 Murda D. Wadsworth Capacity Trustee
 Signature Murda D. Wadsworth Capacity Manager

SELLER (GRANTOR) INFORMATION		BUYER (GRANTEE) INFORMATION	
<small>(REQUIRED)</small>		<small>(REQUIRED)</small>	
Print Name:	<u>Murda Wadsworth</u>	Print Name:	<u>Same</u>
Address:	<u>51045 Dolores Dr.</u>	Address:	_____
City:	<u>Sparks</u>	City:	_____
State:	<u>NV</u> Zip: <u>89436</u>	State:	_____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING
(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: John E. Lewis Escrow # _____
 Address: 625 PLUMAS ST
 City: RENO State: NV Zip: 89509