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A.P.N.: 006-271-24
File No: 152-2150766 (MJ)
R.P.T.T.: \$62.40

FILED FOR RECORDING
AT THE REQUEST OF

First American Title
2004 AUG 10 PM 2 03

When Recorded Mail To: and Mail Tax Statements To:
The Woolman Family Trust
4439 Sharpshooter Lane
North Las Vegas, NV 89031

LINCOLN COUNTY RECORDER
FEE 15⁰⁰ 62.40 DEPTMS
LESLIE BOUCHER

GRANT, BARGAIN and SALE DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Jimmie Rosa and Mary H. Rosa, husband and wife

do(es) hereby GRANT, BARGAIN and SELL to

Gary D. Woolman and Elizabeth A. Woolman, Trustees of The Woolman Family Trust
dated April 10, 2003

the real property situate in the County of Lincoln, State of Nevada, described as follows:

Parcel 3 of Parcel Map recorded April 29, 1997 in Plat Book B, page 33 as File No. 108853 and amended Parcel Map recorded July 19, 1999 in Plat Book B, page 233 as File No. 113094 and re-recorded August 5, 1999 in Plat Book B, page 240 as File No. 113160 in the Office of the County Recorder, Lincoln County, Nevada.

Subject to

1. All general and special taxes for the current fiscal year.
2. Covenants, Conditions, Restrictions, Reservations, Rights, Rights of Way and Easements now of record.

TOGETHER with all tenements, hereditaments and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

Date: 08/01/2004

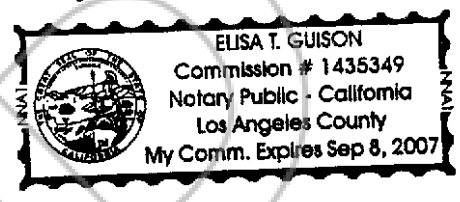
Jimmie Rosa
Jimmie Rosa

Mary H. Rosa
Mary H. Rosa

STATE OF **CALIFORNIA**)
COUNTY OF Los Angeles) **ss.**

This instrument was acknowledged before me on Aug. 5, 2004 by **Jimmie Rosa and Mary H. Rosa.**

Elisa T. Guison
Notary Public
(My commission expires: Sept. 8, 2007)



This Notary Acknowledgement is attached to that certain Grant, Bargain Sale Deed dated **August 01, 2004** under Escrow No. **152-2150766.**

**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number(s)

- a) 006-271-24
- 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) Comm' l/nd'l
- g) Agricultural h) Mobile Home
- i) Other _____

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument #	<u>122810</u>
Book	<u>189</u> Page: <u>347</u>
Date of Recording:	<u>Aug. 10, 2004</u>
Notes:	_____

3. Total Value/Sales Price of Property:

\$16,000.00

Deed in Lieu of Foreclosure Only (value of property) (\$ _____)

Transfer Tax Value: \$16,000.00

Real Property Transfer Tax Due \$62.40

4. **If Exemption Claimed:**

- a. Transfer Tax Exemption, per 375.090, Section: _____
- b. Explain reason for exemption: _____

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: Jimmie Rosa Capacity: owner

Signature: Mary H. Rosa Capacity: owner

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

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

Print Name: Jimmie Rosa and Mary H. Rosa

Print Name: Gary D. Woolman and Elizabeth A. Woolman, Trustees of The Woolman Family Trust dated April 10, 2003

Address: 13533 Bailey Street

Address: 4439 Sharpshooter Lane

City: Whittier

City: North Las Vegas

State: CA Zip: 90601

State: NV Zip: 89031

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

Print Name: First American Title Company of Nevada File Number: 152-2150766 MJ/SKW

Address: 768 Aultman Street, P.O. Box 151048

City: Ely State: NV Zip: 89315

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Signature: Gary D. Woolman Capacity: _____

Signature: Elizabeth A. Woolman Capacity: _____

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

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