

124411

Recording Requested By
FATCO

RECORDING REQUESTED BY

ARM Financial Corp.
PO Box 85309
San Diego CA 92186-5309

MAIL TAX STATEMENTS TO:
First Preston Foreclosure Specialists
5040 Addison Circle #300
Addison, TX 75001
FHA Case #: 332-3133895796

FILED FOR RECORDING
AT THE REQUEST OF

First American Title

2005 APR 29 PM 4 36

LINCOLN COUNTY RECORDER
FEE No Fee DEF on
LESLIE BOUCHER

Space above this line for recorder's use

Trustee Sale No. 03-03587 Loan No. 8498809998 Title Order No. 2051594-wr

GRANT DEED

APN # 003-091-12

The undersigned grantor(s) declare(s):

- 1) The grantee herein was the foreclosing beneficiary.
- 2) The amount of the unpaid debt together with cost was \$77,770.00
- 3) The amount paid by the grantee at the trustee sale was \$77,770.00
- 4) The document transfer tax is\$0.00
- 5) Said property is in the city of CALIENTE

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

WASHINGTON MUTUAL BANK, FA, successor in interest to HOMESIDE LENDING, INC.

hereby GRANT(S) to The Secretary of Housing and Urban Development of Washington D.C., his/her Successors and Assigns, the following described real property in the County of LINCOLN, State of Nevada:

LOT 18 AS SHOWN ON THE AMENDED PLAT OF THE LINCOLN PARK ADDITION TO THE TOWN OF CALIENTE, FILED APRIL 28, 1945 AS DOCUMENT NO. 19694, IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY, NEVADA

Property: 445 MCARTHUR CIRCLE, CALIENTE, NV 89008

DATE: 9/10/04

Washington Mutual BANK, FA

Beverly K Huber
NAME: Beverly K Huber
TITLE: Asst. Secretary

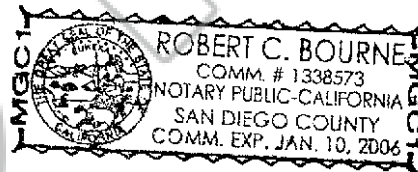
Susan A Harris
NAME: Susan A Harris
TITLE: Asst. Vice President

STATE OF: CALIFORNIA
COUNTY OF: SAN DIEGO

On 4-25-05 before me, Robert C Bourne, a Notary Public in and for said county, personally appeared Beverly K Huber, Asst. Secretary, and Susan A Harris, Asst. Vice President, 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 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.

Robert C Bourne
Notary Public in and for said County and State
Commission # 1338573
Commission Expires 1/10/2006



03-03587

STATE OF NEVADA
DECLARATION OF VALUE

- 1. Assessor Parcel Number(s)
 - a) 003-091-18
 - 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
Other _____	

FOR RECORDERS OPTIONAL USE ONLY
 Document/Instrument #: 124411
 Book 200 Page: 420-421
 Date of Recording: April 29, 2005
 Notes: _____

3. Total Value/Sales Price of Property \$ 47,770.00
 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 2
 b. Explain Reason for Exemption: Government transfer to HUD

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 [Signature] Capacity Asst. Secretary, ARM financial corporation on behalf of Washington Mutual Bank, FA
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)
 Print Name: Washington Mutual Bank
 Address: 8120 Nations Way Bldg 100
 City: Jacksonville
 State: FL Zip: 32250

BUYER (GRANTEE) INFORMATION (REQUIRED)
 Print Name: Dept. of HUD
 Address: 5040 Addison Circle #300
 City: Addison
 State: TX Zip: 75001

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)
 Print Name: First American Title Escrow # _____
 Address: 180 Cassia Way # 502
 City: Henderson, NV 89014 State: _____ Zip: _____

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