

Official Record

Recording requested By
BARBARA BARTHOLOMEW

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: AE

Book- 230 Page- 0058



APN 001-112-02

GRANTEE'S ADDRESS;

P.O. Box 455
Pioche, Nevada 89043JOINT TENANCY GRANT, BARGAIN AND SALE DEED

THIS INDENTURE, made the 29 day of March, 2007, by and between BARBARA BARTHOLOMEW, a widow, party of the first part, and hereinafter referred to as "Grantor", and BARBARA BARTHOLOMEW and YVONNE ROBERTS, Mother and Daughter, as Joint Tenants with Full Right of Survivorship, parties of the second part and hereinafter referred to as "Grantees";

W I T N E S S E T H:

That the said Grantor, for and in consideration of the sum of Ten Dollars (\$10.00) lawful money of the United States of America, and other good and valuable considerations, the receipt whereof is hereby acknowledged, does hereby grant, bargain and sell unto said Grantees, in joint tenancy and to the survivor of them and to the heirs of such survivor, forever, all those certain lots, pieces or parcels of land situate, lying and being in the County of Lincoln, State of Nevada, and bounded and particularly described as follows, to-wit:

Block 26, Lot 38, Port. of Lot 39, District
1.0, Pioche, County of Lincoln, State of
Nevada.



TOGETHER WITH ALL AND SINGULAR, the tenements,
hereditaments and appurtenances thereunto belonging and in anywise
appertaining, and the reversion and reversions, remainder and
remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD, ALL AND SINGULAR, the said premises
together with the appurtenances, unto the said Grantees, as joint
tenants and not as tenants in common, and to the heirs of the
survivor of them, forever.

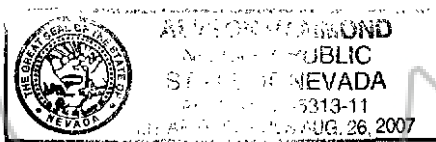
IN WITNESS WHEREOF, the said Grantor has hereunto set her
hands the day and year first above written.

Barbara Bartholomew

BARBARA BARTHOLOMEW

STATE OF NEVADA)
) ss.
COUNTY OF LINCOLN)

On 29 March, 2007, personally appeared
before me, a Notary Public, BARBARA BARTHOLOMEW, personally known
or proved to me to be the person whose name is subscribed to the
above instrument who acknowledged that she executed the instrument.



Alyson Hanson

NOTARY PUBLIC

State of Nevada Declaration of Value

DOC # DV-128614
03/29/2007 02:35 PM
Official Record

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1. Assessor Parcel Number(s)

- a) 001-112-02
- b) _____
- c) _____
- d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document / Instrument # _____
Book: _____ Page: _____
Date of Recording: _____
Notes: _____

2. Type of Property

- a) Vacant Land
- b) Single Family Res.
- c) Condo/Townhouse
- d) 2-4 Plex
- e) Apartment Building
- f) Commercial /Ind'l
- g) Agriculture
- h) Mobile Home
- i) other _____

3. Total Value / Sales Price of Property

\$ _____
Deed In Lieu Only (value of forgiven debt) \$ _____
Taxable Value \$ _____
Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, section: 5
- b. Explain Reason for Exemption: Mother to Mother & Daughter

5. Partial Interest: Percentage being transferred: _____ %

The undersigned Seller (Grantor)/Buyer (Grantee), 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 1/2% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Barbara Bartholomew Capacity _____

Signature Barbara Bartholomew Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name _____
Address _____
City _____
State _____ Zip _____

Print Name Barb Bartholomew
Address P013 450
City Pioche
State NV. Zip 89043

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

Co. Name _____ Esc. # _____
Address _____
City _____ State: _____ Zip _____

(As a public record, this form may be recorded / microfilmed)