

Official RecordRecording requested By
MICHAELSON & ASSOCIATES, LTD

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: AE

Book- 238 Page- 0002

APN: 002-091-01

Recording Requested by:
MICHAELSON & ASSOCIATES, LTD.
AND WHEN RECORDED MAIL THIS TO
Michaelson & Associates, Ltd.
5854 South Pecos Road, Suite 100
Las Vegas, Nevada 89120

Mail tax statements to:
James Wade Thirirot
4119 Monthill Ave.
Las Vegas, Nevada 89121



GRANT, BARGAIN, SALE DEED
(Real Property)

The undersigned LANE T. THIRIOT, as Trustee of THE OMA THIRIOT REVOCABLE LIVING TRUST, DATED THE 27TH DAY OF JULY, 1999, LANE THIRIOT, AS TRUSTEE, having an address of 8240 EDMOND ST., Las Vegas, Nevada 89139, grantor, does hereby grant, bargain, sell and convey to JAMES WADE THIRIOT, a married MAN, as his sole and separate property, grantee, the following described property in Lincoln County, State of Nevada:

ALL OF LOT ONE (1) IN BLOCK TWENTY FOUR (24) OF THE TOWN OF PANACA, LINCOLN COUNTY, NEVADA as delineated and described in the Official plat of said Town on file and recorded in the office of the County Recorder of Lincoln, Nevada.

Assessor's Parcel No: 002-091-01

SUBJECT TO ALL LIENS, ENCUMBRANCES, RESTRICTIONS, COVENANTS,
EASEMENTS AND CONDITIONS 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 of profits thereof.

WITNESS my hand this 20 day of November, 2007, in the City of Las Vegas, County of Clark, State of Nevada.

GRANTOR:


LANE T. THIRIOT



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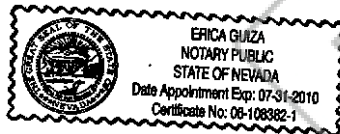
12/03/2007
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NOTARY SUBSCRIPTION

STATE OF NEVADA)
 : ss.
COUNTY OF CLARK)

On this 20 day of November, 2007, before me, the undersigned Notary, personally appeared LANE T. THIRIOT, who is personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that he executed it. I declare under penalty of perjury that the person whose name is ascribed to this instrument appears to be of sound mind and under no duress, fraud, or undue influence.

NOTARY SEAL:



Erica Guiza

Notary Public, State of Nevada



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STATE OF NEVADA
DECLARATION OF VALUE FORM

1. Assessor Parcel Number(s)

- a) 002-091-01
- 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/Ind'l
- g) Agricultural
- h) Mobile Home
- Other

FOR RECORDER'S OPTIONAL USE ONLY	
Book: _____	Page: _____
Date of Recording: _____	
Notes: _____	

3. Total Value/Sales Price of Property

Deed in Lieu of Foreclosure Only (value of property) \$ 0

Transfer Tax Value: (_____)

Real Property Transfer Tax Due \$ 0

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 7
- b. Explain Reason for Exemption: transfers without consideration to or from a 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 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 J. Humphries Capacity Attorney

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Lane T. Thiriot, Trustee, Oma Thiriot

Address: 8240 S. Eamonis Living Trust

City: Las Vegas

State: NV Zip: 89139

Print Name: James W. Thiriot

Address: 4119 Monthall Ave.

City: Las Vegas

State: NV Zip: 89121

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

Print Name: Michaelson & Associates Escrow #: _____

Address: 5854 S. Pecos Rd., Suite 100

City: Las Vegas State: NV Zip: 89120