

Official Record

Recording requested By
LAWRENCE W. OLSEN

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2

RPTT:

Recorded By: LB

Book- 239 Page- 0007

APN 004-161-06
004-161-07

This space reserved



RPTT \$0

Recorded at the request of
Lawrence W. Olson

Mail Tax Bill and when recorded

Mail to:

LAWRENCE OLSON
2117 HILLSGATE STREET
LAS VEGAS, NV 89134

GRANT, BARGAIN AND SALE DEED

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged Lawrence W. Olson hereby grants, bargains, sells, and conveys to Lawrence W. Olson, Trustee of the Lawrence W Olson Living Trust dated August 14, 2007 and any amendments thereto that property in Lincoln County, Nevada described as follows:

LEGAL DESCRIPTION-EXHIBIT A

LOTS 3 AND 4 IN BLOCK TWO (2) OF ALAMO WEST SUBDIVISION - PHASE II, AS SHOWN BY MAP THEREOF RECORDED OCTOBER 15, 1993 IN PLAT BOOK A, PAGE 392, AS FILE NO. 101044 IN THE OFFICE OF THE COUNTY RECORDER OF 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 January 4, 2008



IN WITNESS WHEREOF, this instrument has been executed this 4th day of January, 2008.

Lawrence W. Olson

Lawrence W. Olson

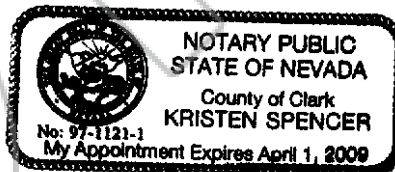
STATE OF NEVADA
COUNTY OF CLARK

On Jan 4th, 2008 before me, the undersigned, a Notary Public in and for the State, personally appeared Lawrence W. Olson personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity and they his signature on the instrument the person or the entity upon behalf of which the person acted executed the instrument.

Witness my hand and official seal

Signature: *Kristen Spencer*

Name: Kristen Spencer



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Page 1 of Fee: \$15.00
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**STATE OF NEVADA
 DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a. 004-161-07
- b. 004-161-06
- c. _____
- d. _____

2. Type of Property:

- | | |
|--|--|
| a. <input type="checkbox"/> Vacant Land | b. <input 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'/Ind'l |
| g. <input type="checkbox"/> Agricultural | h. <input type="checkbox"/> Mobile Home |
| <input type="checkbox"/> Other _____ | |

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____
 Date of Recording: _____
 Notes: Trust

3. a. Total Value/Sales Price of Property

\$ 0.00

b. Deed in Lieu of Foreclosure Only (value of property)

(0.00)

c. Transfer Tax Value:

\$ 0.00

d. Real Property Transfer Tax Due

\$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption per NRS 375.090, Section 7
- b. Explain Reason for Exemption: Transfer to trust without consideration

5. Partial Interest: Percentage being transferred: 100.00 %

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 Grantor
 Signature [Signature] Trustee Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Lawrence W. Olson
 Address: 2117 Hillgate St.
 City: Las Vegas
 State: NV Zip: 89134

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Lawrence W. Olson, Trustee
 Address: 2117 Hillgate St.
 City: Las Vegas
 State: NV Zip: 89134

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

Print Name: _____ Escrow #: _____
 Address: _____
 City: _____ State: NV Zip: _____