

Official Record

Recording requested By
NANNETTE FREHNER

Lincoln County - NV
Leslie Boucher - Recorder

Fee: \$39.00 Page 1 of 1
RPTT: \$171.60 Recorded By: AE
Book- 265 Page- 0047



APN: 012-230-22
Recording requested by and mail documents and
tax statement to:
Name: Nannette Frehner
Address: P.O. Box 151
City/State/Zip: Pioche, Nevada 89043

DEED GRANTING LIFE ESTATE

n.f. Nannette Frehner
THIS INDENTURE IS WITNESS that GRANTOR GARY A. CARRIGAN, as Trustee of the "5-C Living Trust", dated 4-30-1995, for a consideration of ten dollars (\$10.00), receipt of which is acknowledged, does hereby grant and transfer to NANNETTE FREHNER, born April 22, 1947 as GRANTEE, a possessory estate for the remainder of her life, or until she vacates the property or becomes legally married, whichever comes first, in the real property situated in the City of Caliente, Lincoln County, Nevada, described as follows:

Parcel 6, as shown by Parcel Map recorded page on 115, in Book B, of the official records of Lincoln County, Nevada,

More commonly known as:
4477 Mustang Avenue
Caliente, Nevada 89008

n.f. Nannette Frehner
The remainder interest in said parcel of real property shall remain in the ownership of the "5-C Living Trust", dated 4-30-1995, and upon termination of the interest of Nannette Frehner, as set forth above, all right, title, and interest shall be vested in the "5-C Living Trust", dated 4-30-1995.

In Witness Whereof, I have set my hands this 13 day of July, 2011.

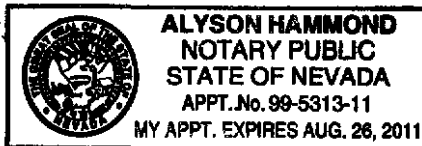
Gary A. Carrigan
GARY A. CARRIGAN, as Trustee
5-C Living Trust

STATE OF NEVADA)
COUNTY OF LINCOLN)

On this 13 day of July, 2011, personally appeared before me, a Notary Public, GARY A. CARRIGAN, personally known to me to be the person described in and whose name is subscribed to the above instrument who acknowledged that he executed this instrument. Witness my hand and official seal.

Alyson Hammond
Notary Public

My commission expires: Aug. 26, 2011



State of Nevada Declaration of Value

DOC # DV-138651
07/13/2011 03.30 PM
Official Record

1. Assessor Parcel Number(s)
 a) 012-230-22
 b) _____
 c) _____
 d) _____

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

2. Type of Property
- | | |
|--|---|
| a) <input type="checkbox"/> Vacant Land | b) <input checked="" type="checkbox"/> Single Family Res. |
| c) <input type="checkbox"/> Condo/Townhouse | d) <input type="checkbox"/> 2-4 Plex |
| e) <input type="checkbox"/> Apartment Building | f) <input type="checkbox"/> Commercial /Ind'l |
| g) <input type="checkbox"/> Agriculture | h) <input type="checkbox"/> Mobile Home |
| i) <input type="checkbox"/> other _____ | |

3. Total Value / Sales Price of Property \$ 43,897
 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: _____
 b. Explain Reason for Exemption: _____

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 1/4% per month. Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature _____ Capacity _____

Signature Nannette Frehner Capacity _____

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

Print Name Cathy A. Carrigan
 Address P.O. Box 251
 City Rioche
 State NV Zip 89043

Print Name Nannette Frehner
 Address P.O. Box 251
 City Rioche
 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)