

APN: 006-041-43

**RECORDING REQUESTED BY:**  
WALLS LAW FIRM  
8861 W. SAHARA AVE SUITE 220  
LAS VEGAS, NV 89117

LINCOLN COUNTY, NV  
\$37.00  
RPTT:\$0.00 Rec:\$37.00  
WALLS LAW FIRM  
OFFICIAL RECORD  
AMY ELMER, RECORDER  
2024-166501  
01/09/2024 08:10 AM  
Pgs=4 AE  
E07

**MAIL TAX STATEMENTS TO AND  
WHEN RECORDED, MAIL TO:**  
S4 TRUST  
22 DRIFTING SHADOW WAY  
LAS VEGAS, NEVADA 89135

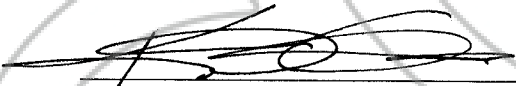
**GRANT, BARGAIN & SALE DEED**

**THIS INDENTURE WITNESSETH:** That **KEVIN T. ORROCK AND DIANA ORROCK, TRUSTEES OF THE 914 TRUST DATED MARCH 9, 2012**, in consideration of Ten Dollars (\$10) and other good and valuable consideration, the receipt of which is hereby acknowledged, do hereby grant, bargain and sell to the **KEVIN T. ORROCK, TRUSTEE OF THE S4 TRUST DATED JANUARY 20, 2020** all that real property situate in the County of Lincoln, State of Nevada, bound and described as follows:

The North One Half of the Southeast Quarter (N 1/2 of SE 1/4) of U.S. GOVERNMENT LOT NUMBERED 12, in Section 2, Township 4 North, Range 67 East, M.D.B. & M.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining. Subject to rights of way, restrictions, easements, covenants, and conditions of record.

**914 TRUST DATED MARCH 9, 2012**



**KEVIN T. ORROCK, TRUSTEE**

DATE: DECEMBER 11, 2023

*Signed in Counterpart*

**DIANA ORROCK, TRUSTEE**

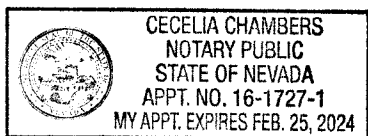
DATE: \_\_\_\_\_

NOTARY CERTIFICATES ON FOLLOWING PAGE

NOTARY CERTIFICATE FOR GRANT, BARGAIN, SALE DEED

STATE OF NEVADA )  
 ) ss:  
COUNTY OF CLARK )

On December 11, 2023, personally appeared before me, a Notary Public of the State of Nevada, **Kevin T. Orrock** who acknowledged that he executed the above instrument in his representative capacity.



*Cecelia Chambers*  
\_\_\_\_\_

NOTARY PUBLIC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )  
 )ss:  
COUNTY OF \_\_\_\_\_ )

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, a Notary Public, personally appeared **Diana Orrock**, who proved to me on the basis of satisfactory evidence to be the **person** whose **name is** subscribed to the within instrument, and acknowledged that **she** executed the foregoing instrument in **her** authorized capacity and that by **her** signature on the instrument, the person or entity upon behalf of which the person acted executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

\_\_\_\_\_  
NOTARY PUBLIC

APN: 006-041-43

RECORDING REQUESTED BY:  
WALLS LAW FIRM  
8861 W. SAHARA AVE SUITE 220  
LAS VEGAS, NV 89117

MAIL TAX STATEMENTS TO AND  
WHEN RECORDED, MAIL TO:  
S4 Trust  
22 Drifting Shadow Way  
Las Vegas, Nevada 89135

**GRANT, BARGAIN & SALE DEED**

**THIS INDENTURE WITNESSETH:** That **KEVIN T. ORROCK AND DIANA ORROCK, TRUSTEES OF THE 914 TRUST DATED MARCH 9, 2012**, in consideration of Ten Dollars (\$10) and other good and valuable consideration, the receipt of which is hereby acknowledged, do hereby grant, bargain and sell to **KEVIN T. ORROCK, TRUSTEE OF THE S4 TRUST DATED JANUARY 20, 2020** the all that real property situate in the County of Lincoln, State of Nevada, bound and described as follows:

The North One Half of the Southeast Quarter (N 1/2 of SE 1/4) of U.S. GOVERNMENT LOT NUMBERED 12, in Section 2, Township 4 North, Range 67 East, M.D.B. & M.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining. Subject to rights of way, restrictions, easements, covenants, and conditions of record.

**914 TRUST DATED MARCH 9, 2012**

Signed in Counterpart  
**KEVIN T. ORROCK, TRUSTEE**

DATE: \_\_\_\_\_

Diana Orrock  
**DIANA ORROCK, TRUSTEE**

DATE: 12/19/23

NOTARY CERTIFICATES ON FOLLOWING PAGE

PLEASE SEE NOTARY  
ATTACHMENT  
INT DAR

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )  
County of Riverside )

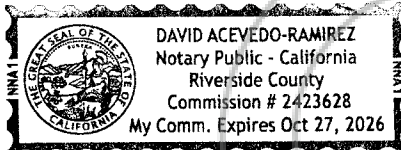
On December 19<sup>th</sup>, 2023 before me, David Acevedo-Ramirez, Notary Public,  
Date Here Insert Name and Title of the Officer

personally appeared Diana Orrock  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal



Signature [Signature]  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

**STATE OF NEVADA  
DECLARATION OF VALUE**

- 1. Assessor Parcel Number(s)
  - a) 006-041-43
  - 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 RECORDERS OPTIONAL USE ONLY**  
 Book \_\_\_\_\_ Page: \_\_\_\_\_  
 Date of Recording: \_\_\_\_\_  
 Notes: TRUST ON FILE. AE

3. Total Value/Sales Price of Property \$ \_\_\_\_\_ N/A  
 Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_ )  
 Transfer Tax Value: \$ \_\_\_\_\_ N/A  
 Real Property Transfer Tax Due \$ \_\_\_\_\_ N/A

- 4. **If Exemption Claimed:**
  - a. Transfer Tax Exemption per NRS 375.090, Section 07
  - b. Explain Reason for Exemption: Transfer to or From a Trust without Consideration
- 5. Partial Interest: Percentage being transferred: 100 %

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 \_\_\_\_\_ Capacity Grantor  
 Signature \_\_\_\_\_ Capacity Grantee

**SELLER (GRANTOR) INFORMATION**  
**(REQUIRED)**  
 Print Name : 914 Trust  
 Address: 22 Drifting Shadow Way  
 City: Las Vegas  
 State: NV Zip: 89135

**BUYER (GRANTEE) INFORMATION**  
**(REQUIRED)**  
 Print Name: S4 Trust  
 Address: 22 Drifting Shadow Way  
 City: Las Vegas  
 State: NV Zip: 89135

**COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)**  
 Print Name: Walls Law Firm Escrow # \_\_\_\_\_  
 Address: 8861 West Sahara Ave., Suite 220  
 City Las Vegas State: NV Zip: 89117