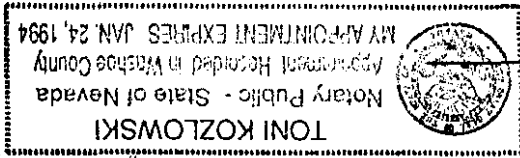


(seal)



Notary Public

Tom Kozlowski

On October 29 personally appeared before me, a Notary Public, Dennis G. Saxon who acknowledged that he executed the above instrument.

County of WASHOE

STATE OF NEVADA

)
:
)

147444
EUREKA COUNTY, NEVADA
M.N. REBALCATEL, RECORDER
FILE NO. 147444
FEES \$ 7.00

BOOK 255 PAGE 312
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Walter Haas
93 NOV 15 AM 3:22

Dennis G. Saxon
DENNIS G. SAXON

Dated October 29, 1993

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.

LOT 4 in Block AA of NEVELCO, INC., UNIT NO. 2, according to the map thereof, filed in the office of the County Recorder of Eureka County, State of Nevada, on October 5, 1961

as joint tenants with right of survivorship, and not as tenants in common, the real property situated in the County of Eureka, State of Nevada described as follows:

WALTER J. HAAS and JOYCE A. HAAS, Husband and wife

does hereby GRANT, BARGAIN and SELL to

DENNIS G. SAXON

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

GRANT, BARGAIN and SALE DEED

WHEN RECORDED, MAIL TO:
Joyce A. Haas
1305 Vance Way
Sparks, NV. 89431

APR 3. 252.00

DECLARATION OF VALUE

Recording Date Nov. 15 Book 255 Page 312 Instrument # 147444

Full Value of Property Interest Conveyed 400,000

Less Assumed Liens & Encumbrances - 0 -

Taxable Value (NRS 375.010, Section 3) 400,000

Real Property Transfer Tax Due 75.65

If exempt, state reason. NRS 375.090, Section 2. Explain: _____

INDIVIDUAL

Under penalty of perjury, I hereby declare that the above statements are correct.

Signature of Declarant DeLuis & Sakou

Name (Please Print) 6710 VERBSE BEAULDR

Address 1111 N. V. 89502

City _____ State _____ Zip _____

ESCROW HOLDER

Under penalty of perjury, I hereby declare that the above statements are correct to the best of my knowledge based upon the information available to me in the documents contained in the escrow file.

Signature of Declarant _____

Name (Please Print) _____

Escrow Number _____

Firm Name _____

Address _____

City _____ State _____ Zip _____

Tax paid for the above transfer on _____, 19____ per NRS 375.030, Section 2.

Signature of Recorder or Representative _____