

DEED

THIS INDENTURE made this 17th day of May, 2002, by and between PATRICIA ANN REITH, an married woman, party of the first part, and JUDITH C. MAYER-LYNN, an unmarried woman, party the second part;

WITNESSETH:

That the party of the first part, for good and valuable consideration, to her in hand paid by the party of the second part the receipt whereof is hereby acknowledged, does by these presents grant, bargain and sell unto the party of the second part, and to her heirs, executors, administrators and assigns, forever, all the certain property situate in the County of Eureka, State of Nevada, more particularly described as follows:

Lot 6 of Block 5 CRESCENT VALLEY RANCH & FARMS, UNIT NO. 4, as per map recorded in said County as File No. 34552.

SUBJECT to exceptions, reservations, restrictions, restrictive covenants, assessments, easements, rights and rights of way of record.

TOGETHER with any and all improvements situate thereon.

TOGETHER with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents issues and profits thereof.

TO HAVE AND TO HOLD said premises, together with the appurtenances, unto the party of the second part, and to her heirs, executors, administrators and assigns, forever.

IN WITNESS WHEREOF, the party of the first part has hereunto set her hand the day and year first above written.

Patricia Ann Reith
PATRICIA ANN REITH

-1-

ROSS P. EARDLEY
ATTORNEY AT LAW
469 IDAHO STREET
ELKO, NEVADA 89801

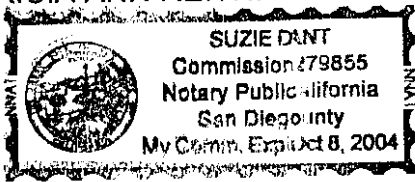
TELEPHONE (775) 738-4046 - FAX (775) 738-6286

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STATE OF CALIFORNIA
COUNTY OF San Diego SS.

This instrument is acknowledged before me on May 17th, 2002, by

PATRICIA ANN REITH.



Suzie Dant
NOTARY PUBLIC

Send Tax Statements to Cntee:
Judith C. Mayer-Lynn
1010 Skyline Blvd.
Battle Mountain, Nevada 820

COPY

BOOK 347 PAGE 270
OFFICIAL RECORDS
Ross P. Eardley atty
02 MAY 22 AM 9:40

CLERK OF SUPERIOR COURT, NEVADA
FILE NO. 178122
RECEIVED, RECORDER
FEES \$15.00

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STATE OF NEVADA
DECLARATION OF ALUE

1. Assessor Parcel Number (s)

a) 003-085-03
b) _____
c) _____
d) _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 178122
Book: 347 Page: 267 270
Date of Recording: 5/22/02
Notes: _____

2. Type of Property:

a) <input checked="" type="checkbox"/>	Vacant Land	<input type="checkbox"/>	Single Fam Res.
c) <input type="checkbox"/>	Condo/Twnhse	<input type="checkbox"/>	2-4 Plex
e) <input type="checkbox"/>	Apt. Bldg.	<input type="checkbox"/>	Comm/Ind'l
g) <input type="checkbox"/>	Agricultural	<input type="checkbox"/>	Mobile Home
h) <input type="checkbox"/>	Other		

3. Total Value/Sales Price of Property:

\$ 500.00
Deed in Lieu of Foreclosure ly (value of property) \$ _____
Transfer Tax Value: \$ 500.00
Real Property Transfer Tax L: \$ 65
(Tax is computed at 65per \$500 value)

4. If Exemption Claimed:

a. Transfer Tax Exemption, NRS 375.090, Section: _____
b. Explain Reason for Exem: _____

5. Partial Interest: Percenta being transferred: _____ %

The undersigned declares and knowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the infoation 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, disallowance of any claimed exemption, or other determination of additional tax due, may resul a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.030, thayer and Seller shall be jointly and severally liable for any additional amount owed.

X Signature Patricia A. Reith Capacity Seller
Signature _____ Capacity _____

SELLER (GRANTOR) INIRMTION

(REQUIRED)

Print Name: PATRICIA A. REITH
Address: 30319 ANONY RD.
City: VALLEY CENTER
State: CA Zip 92082

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: JUDITH C. MAYER-LYNN
Address: 1010 SKYLINE BLVD.
City: Battle Mountain
State: NV Zip: 89820

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

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

(AS A PUBLIC RECD THIS FORM MAY BE RECORDED)