

RPTT: Exempt 8a  
APN: 3-085-05

180397

**GRANT, BARGAIN, AND SALE DEED**

THIS INDENTURWITNESS: That RONALD R. FELLION, A Single Man, As Sole and Separate Property [hereinafter called RANTOR(S)] in consideration of \$ ZERO Dollars (\$ 0), the receipt of which is hereby acknowledged, do hereby **GRANT, BARGAIN, SELL AND CONVEY** to **RONALD R. FELLION, or IRINA FELLION, Trust or their successors in trust, under the FELLION LIVING TRUST, dated NOV 1 5 2002** and amendments thereto [hereinafter called "GRANTEE(S)"] all that real property situated in the County of Esca, State of Nevada, bounded and described as follows:

LOT 4, BLOCK 5 ESCENT VALLEY RANCH & FARMS UNIT NO. 4, as recorded

SUBJECT TO tax for the present fiscal year and subsequently, covenants, conditions, restrictions, exceptions and reservations, easements, encumbrances, leases or licenses, its and rights of way of record, if any.

**-WITH WARRANTY COGNANTS-**

Together with all tenement credits and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, any reversions, remainders, rents, issues or profits thereof.

IN WITNESS WHEREOF, have hereunto set our hands this 15 day of Nw, 2002.

Ronald Fell  
(Signature)

\_\_\_\_\_  
(Signature)

RONALD R. FELLION  
(Print Name)

\_\_\_\_\_  
(Print Name)

STATE OF NEVADA      )  
                                  ) SS.  
COUNTY OF CLARK     )

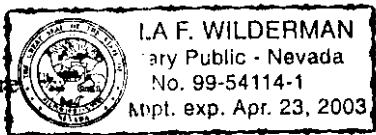
On this 15th day of November, 2002,  
personally appeared before me a Notary Public

RONALD R. FELLION

personally known to me to be the person whose name is subscribed to the above instrument who acknowledged that he executed this instrument.

Myla Wilderman  
Notary Public

Place Seal Here



**RECORDING REQUESTED BY AND MAIL TO**

NAME: Mr. and Mrs. Ronald R. Fellion  
ADDRESS: 5724 Majestic Tide Avenue  
CITY: Las Vegas  
STATE/ZIP: NV 89131

**If applicable, mail tax statements to:**

NAME: Mr. and Mrs. Ronald R. Fellion  
ADDRESS: 5724 Majestic Tide Avenue  
CITY: Las Vegas  
STATE/ZIP: NV 89131

SPACE BELOW THIS LINE  
FOR RECORDERS USE ONLY

State of Nevada  
Declaration of Value

1. Assessor Parcel Number:

- a) 3-085-05
- b) 3-085-06
- c) \_\_\_\_\_
- d) \_\_\_\_\_

FOR RECORDERS OPTIONAL USE ONLY  
 Document/Instrument # 180397  
 Book 356 Page 253  
 Date of Recording: 12-20-02  
 Notes: \_\_\_\_\_

2. Type of Property:

- a)  Vacant Land
- b)  Single Fam. Res.
- c)  Condo/Twr
- d)  2-4 Plex
- e)  Apt. Bldg.
- f)  Comm'/Ind'l
- g)  Agriculture
- h)  Mobile Home
- i)  Other \_\_\_\_\_

3. Total Value/Sales Price Property: \$ \_\_\_\_\_

Deduct Assumed Ls and/or Encumbrances: ( \_\_\_\_\_ )  
 Transfer Tax Valuer NRS 375.010, Section 2: \$ \_\_\_\_\_  
 Real Property Trans Tax Due: \$ \_\_\_\_\_

4. **If Exemption Claimed**

- a. Transfer Tax Exemtion, per NRS 375.090, Section: 8a
- b. Explain Reason for exemption: Ronald R. Fellion and Irina Fellion are trustors of the Fellion Living Trust and transfer is made without consideration

5. Partial Interest: Percent being transferred: 100 %

The undersigned decs and acknowledges, under penalty of perjury, pursuant to NRS.375.060 and NRS 375.110, that the information provided 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 375.110, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Ronald R. Fellion Capacity Grantor  
 Signature Irina Fellion Capacity Grantee

**SELLER (GRANTOR) INFORMATION (REQUIRED)**

**BUYER (GRANTEE) INFORMATION (REQUIRED)**

Print Name: Ronald R. Fellion Print Name: Irina Fellion, Trustor/Trustee  
 Address: 5724 Majestic Tide Ave Address: 5724 Majestic Tide Ave  
 City: Las Vegas City: Las Vegas  
 State: Nevada Zip: 89131 State: Nevada Zip: 89131

**COMPANY REQUESTING RECORDING (required if not seller or buyer)**

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)