

18

REQUESTED BY
Andrew Mackenzie
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

APN: 1220-16-110-018
RETURN RECORDED DEED TO:
✓ ANDREW MACKENZIE, ESQ.
ALLISON, MACKENZIE, RUSSELL,
PAVLAKIS, WRIGHT & FAGAN, LTD.
402 North Division Street
Carson City, NV 89703

2003 DEC -2 PM 3: 37

WERNER CHRISTEN
RECORDER

\$18⁰⁰ PAID KD DEPUTY

GRANTEE/MAIL TAX STATEMENTS TO:
Sharon Vargas
966 Casey Lane
Gardnerville, NV 89460

R.P.T.T. \$ #6

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE, made on November 17, 2003, by and
between WELLS FARGO BANK, N.A., as Trustee of "THE DORIS PAULINE WALLACE 1988
TRUST," dated July 19, 1988, grantor, and SHARON ANN VARGAS and KATHLEEN L.
FERREIRA, as tenants in common, grantees,

WITNESSETH:

That DORIS PAULINE WALLACE died on or about July 29, 2003, and that a
certified copy of the Certificate of Death is attached hereto as Exhibit "A" and incorporated herein
by this reference.

That WELLS FARGO BANK, N.A. is the Trustee of "THE DORIS PAULINE
WALLACE FAMILY TRUST."

That the grantor, in consideration of the sum of Ten and No/100 Dollars (\$10.00),
lawful money of the United States, and other good and valuable consideration to it in hand paid by

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BK1203PG1094

the grantees, the receipt whereof is hereby acknowledged, does by these presents grant, bargain, and sell to the grantees, and to their successors and assigns, all that certain lot, piece, or parcel of land situated in Gardnerville, state of Nevada, and more particularly described as follows:

(See, Exhibit "B" attached hereto and incorporated herein by this reference.)

TOGETHER WITH all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder or remainders, rents, issues, and profits thereof.

TO HAVE AND TO HOLD all and singular the premises, together with the appurtenances, unto the said grantee and to their successors and assigns forever.

IN WITNESS WHEREOF, the grantor has executed this conveyance the day and year first above written.

WELLS FARGO BANK, N.A.

By *Jan Watson*
JAN WATSON

By *Melvena Taylor*
MELVENA TAYLOR

STATE OF NEVADA)

: ss.

WASHOE COUNTY)

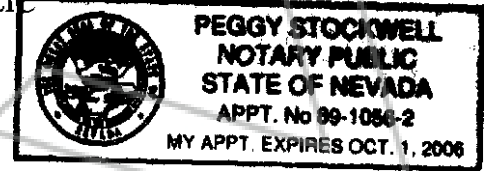
On November 17, 2003, personally appeared before me, a notary

public, JAN WATSON, personally known (or proved) to me to be the person whose name is

///

subscribed to the foregoing Grant, Bargain and Sale Deed, who acknowledged to me that she executed the foregoing document.

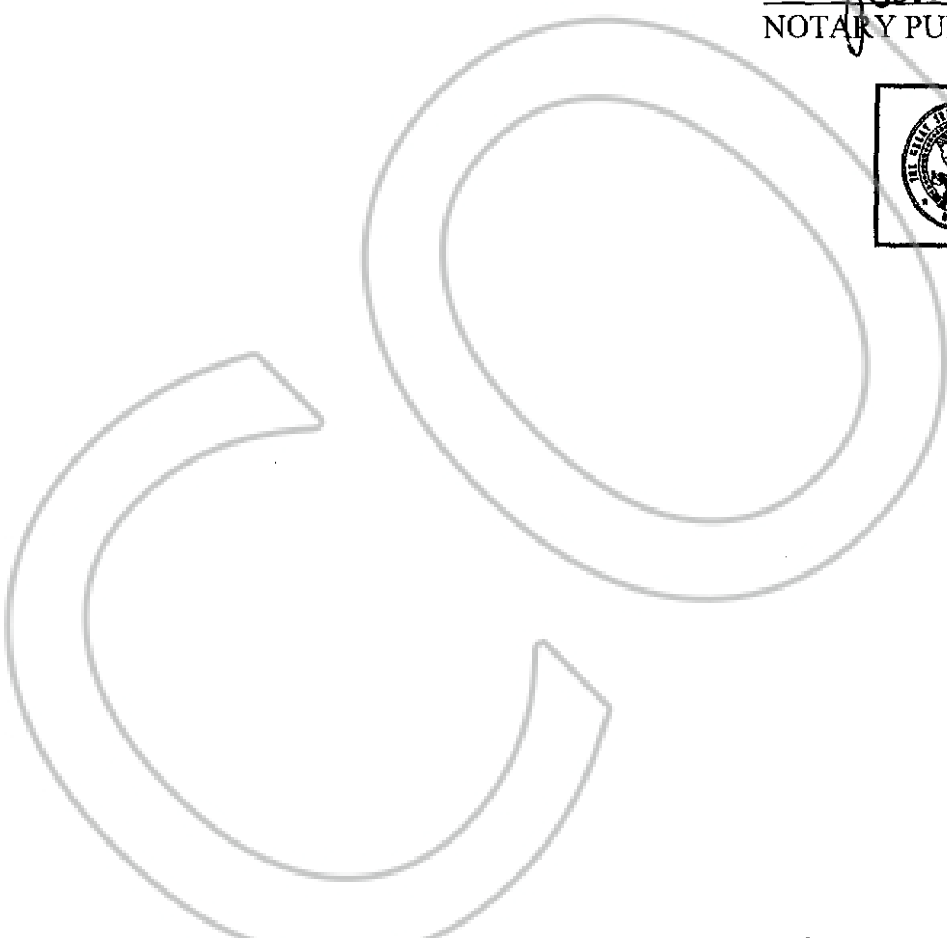
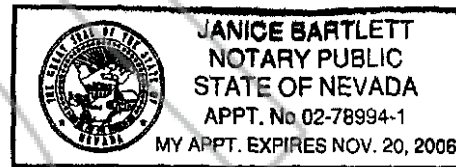
Peggy Stockwell
NOTARY PUBLIC



STATE OF NEVADA)
 : SS.
CLARK COUNTY)

On November 17, 2003, personally appeared before me, a notary public, MELVENA TAYLOR, personally known (or proved) to me to be the person whose name is subscribed to the foregoing Grant, Bargain and Sale Deed, who acknowledged to me that she executed the foregoing document.

Janice Bartlett
NOTARY PUBLIC



STATE OF NEVADA

DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH VITAL STATISTICS

STATE OF NEVADA — DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH — SECTION OF VITAL STATISTICS CERTIFICATE OF DEATH

TYPE OR PRINT IN PERMANENT BLACK INK	LOCAL FILE NUMBER		STATE FILE NUMBER	
	DECEASED—NAME First Middle Last		DATE OF DEATH (Month, Day, Year)	
DECEDENT	1. Doris P. WALLACE		2. July 29, 2003	
	CITY, TOWN OR LOCATION OF DEATH		COUNTY OF DEATH	
	3b. Carson City		3a. Carson City	
IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS	HOSPITAL OR OTHER INSTITUTION—Name (If not either, give street and number)		If Hosp. or Inst. indicate DOA, OP/Emer. Rm. Inpatient (Specify)	
	3c. Carson Tahoe Hospital		3e. Emergency Room	
	SEX		4. Female	
PARENTS	RACE—(e.g., White, Black, American Indian, etc.) (Specify)		Was Decedent of Hispanic Origin? Specify <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, specify Mexican, Cuban, Puerto Rican, etc.	
	5. White		6.	
	AGE—Last Birthday (Years)		7a. 84	
DISPOSITION	UNDER 1 YEAR MOST : DAYS		UNDER 1 DAY HOURS : MINS	
	7b. :		7c. :	
	DATE OF BIRTH (Mo., Day, Yr.)		8. September 19, 1918	
CERTIFIER	STATE OF BIRTH (If not U.S.A., name country)		CITIZEN OF WHAT COUNTRY	
	9a. Canada		9b. U.S.A.	
	Decedent's Education. Specify highest grade completed.		10. 12	
CAUSE OF DEATH	MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify)		SURVIVING SPOUSE (If wife, give maiden name)	
	11. Widowed		12.	
	SOCIAL SECURITY NUMBER		USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even if Retired)	
CAUSE OF DEATH	13. ██████████ 0179		14a. Homemaker	
	KIND OF BUSINESS OR INDUSTRY		14b. Own Home	
	RESIDENCE—STATE		COUNTY	
CAUSE OF DEATH	15a. Nevada		15b. Douglas	
	CITY, TOWN, OR LOCATION		STREET AND NUMBER	
	15c. Gardnerville		15d. 1204 Pleasantview Dr.	
CAUSE OF DEATH	INSIDE CITY LIMITS (Specify Yes or No)		15e. yes	
	FATHER—NAME First Middle Last		MOTHER—MAIDEN NAME First Middle Last	
	16. Harry Howard Lee		17. Ruth H. Howard	
CAUSE OF DEATH	INFORMANT—NAME (Type or Print)		MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip)	
	18a. Kathleen Ferreira - Daughter		18b. 1204 Pleasantview Drive, Gardnerville, NV 89460	
	BURIAL, CREMATION, REMOVAL, OTHER (Specify)		CEMETERY OR CREMATORY—NAME	
CAUSE OF DEATH	19a. Cremation		19b. FitzHenry's Crematory	
	LOCATION City or Town State		19c. Carson City, Nevada	
	FUNERAL DIRECTOR—SIGNATURE (Or Person Acting As Such)		FUNERAL DIRECTOR LICENSE NUMBER	
CAUSE OF DEATH	20a. <i>[Signature]</i>		20b. 217	
	NAME AND ADDRESS OF FACILITY		20c. 833 N. Edmonds Drive, Carson City, NV 89701	
	21. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated.		22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated.	
CAUSE OF DEATH	(Signature and Title)		(Signature and Title)	
	DATE SIGNED (Mo., Day, Yr.)		DATE SIGNED (Mo., Day, Yr.)	
	21b. 7/30/03		22b. :	
CAUSE OF DEATH	HOUR OF DEATH		HOUR OF DEATH	
	21c. 1430		22c. :	
	NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		PRONOUNCED DEAD (Mo., Day, Yr.)	
CAUSE OF DEATH	21d.		22d. ON	
	NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER). (Type or Print.)		PRONOUNCED DEAD (Hour)	
	23a. Robert Flegler, M.D., 775 Fleischmann Way, Carson City, NV		22e. AT	
CAUSE OF DEATH	LICENSE NUMBER		23b. 9310	
	REGISTRAR		DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.)	
	24a. (Signature) <i>Vera A. Kachang Dep</i>		24b. August 1, 2003	
CAUSE OF DEATH	DEATH DUE TO COMMUNICABLE DISEASE		24c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c))		Interval between onset and death	
	PART I (a) CRERIAL ANOXIA 2° to		:	
CAUSE OF DEATH	DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
	(b) Cardiopulmonary Arrest		:	
	DUE TO, OR AS A CONSEQUENCE OF:		Interval between onset and death	
CAUSE OF DEATH	(c) Acute Fibrotic		:	
	PART II OTHER SIGNIFICANT CONDITIONS—Conditions contributing to death but not resulting in the underlying cause given in Part I.		AUTOPSY (Specify Yes or No)	
	Acute Renal FAILURE		26. No	
CAUSE OF DEATH	WAS CASE REFERRED TO CORONER (Specify Yes or No)		27. Yes	
	ACC. SUICIDE, HOM., UNDET., OR PENDING INVEST. (Specify)		DATE OF INJURY (Mo., Day, Yr.)	
	28a.		28b.	
CAUSE OF DEATH	HOUR OF INJURY		DESCRIBE HOW INJURY OCCURRED	
	28c. M		28d.	
	INJURY AT WORK (Specify Yes or No)		PLACE OF INJURY—At home, farm, street, factory, office building, etc. (Specify)	
CAUSE OF DEATH	28e.		28f.	
	LOCATION.		STREET OR R.F.D. No.	
	28g.		CITY OR TOWN STATE	



STATE REGISTRAR

No.242922

Yvonne Sylva

This is to certify that the above is a true and correct copy of the certificate on file in this office.

Date Issued: **AUG 01 2003**

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State Registrar

WARNING: IT IS ILLEGAL TO ALTER OR COPY THIS DOCUMENT

BKT203P6T097

EXHIBIT "B"

All that certain parcel of real property situate in Gardnerville, state of Nevada, more particularly described as follows:

Lot 2, Block A of the FINAL MAP OF PLEASANTVIEW SUBDIVISION PHASE I, according to the map thereof, filed in the office of the County Recorder of Douglas County, State of Nevada on April 6, 1990, in Book 490, Page 916, as Document NO. 223488

Being Assessor's Parcel Number 1220-16-110-018.