

A.P.N.: 1320-29-214-030
File No: 143-2203033 (MK)
R.P.T.T.: \$1,423.50

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 3 Fee: 16.00
BK-0505 PG- 9738 RPIT: 1423.50



When Recorded Mail To: Mail Tax Statements To:
Joseph C. Blanks
P.O. 999
Doucette TX 75942

GRANT, BARGAIN and SALE DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Shean M. Galvin and Shannon L. Galvin, husband and wife as Joint Tenants

do(es) hereby GRANT, BARGAIN and SELL to

Joseph C. Blanks, ~~a married man as his sole and separate property~~
Susan E. Blanks, husband and wife as Joint Tenants

the real property situate in the County of Douglas, State of Nevada, described as follows:

**LOT 5, AS SHOWN ON OFFICIAL MAP OF WINHAVEN UNIT NO.2, PHASE B, A
PLANNED UNIT DEVELOPMENT, FILED FOR RECORD IN THE OFFICE OF THE COUNTY
RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON SEPTEMBER 14, 1990, IN
BOOK 990, PAGE 1935, AS DOCUMENT NO. 234655.**

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.

Date: 05/05/2005

Shean M Galvin by Shannon L Galvin
Shean M. Galvin - his attorney in fact
Shannon L Galvin
Shannon L. Galvin

STATE OF **NEVADA**)
 : **ss.**
COUNTY OF **DOUGLAS**)

This instrument was acknowledged before me on May 12, 2005 by **Shean M. Galvin and Shannon L. Galvin.**

Mary Kelsh

Notary Public

(My commission expires: 11-5-06)



This Notary Acknowledgement is attached to that certain Grant, Bargain Sale Deed dated **May 05, 2005** under Escrow No. **143-2203033**.

STATE OF Nevada }
COUNTY OF Douglas } ss.
}

On May 12, 2005, before
me, MARY KELSH personally
appeared Shannon L. Galvin Power of atty for shean M. Galvin,
personally known to me (or 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 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.

WITNESS my hand and official seal.



*This area for official
notarial seal*

Signature Mary Kelsh

My Commission Expires: _____

Notary Name: MARY KELSH
Notary Registration Number: _____

Notary Phone: 775-782-5411
County of Principal Place of Business: _____

