

This Document was Prepared by:

Mike Kincade  
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Rancho Cordova, CA 95741

After Recording Please Return to:

Andrew & Kimberly Anderson  
P.O. Box 0489  
Eustis, FL 32727

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BOOK 375 PAGE 110  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*Mike Kincade*  
2004 FEB 17 PM 2:44

EUREKA COUNTY, NEVADA  
M.N. REBALEATI, RECORDER  
FILE NO. FEES 14.00

185395

### SPECIAL WARRANTY DEED

This INDENTURE, made the 30th day of January, 2004,  
between Mike Kincade of the County of Sacramento, State of California, hereinafter called "Grantor" and  
Andrew A. & Kimberly A. Anderson whose address is P.O. Box 0489 Eustis, Florida 32727, of the County of Lake County  
State of Florida hereinafter called "Grantee" (the terms "Grantor" and "Grantee" are used for the singular and  
plural, as the context demands).

WITNESSETH that: Grantor, for and in consideration of Ten Dollars (\$10.00) and other good and valuable considerations  
to said Grantor in hand paid by said Grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and  
sold and by these presents does grant bargain and sell unto the said Grantee, and Grantee's heirs and assigns forever, land  
situate, lying and being in Eureka County Nevada and more particularly describes as follows:

Township 29 North, Range 52 East, MDB&M  
Section 31: N2N2SW4  
APN005-720-07

SUBJECT TO: Existing taxes, assessments, covenants, conditions, restrictions, rights of way and easements of record.

And the GRANTOR binds itself and its successors to warrant the title against its acts and none other, subject to the  
matters above set forth.

IN WITNESS WHEREOF, the Grantor has executed this Deed on the date set forth above.

*[Signature]*  
\_\_\_\_\_  
Grantor

*[Signature]*  
\_\_\_\_\_  
Witness

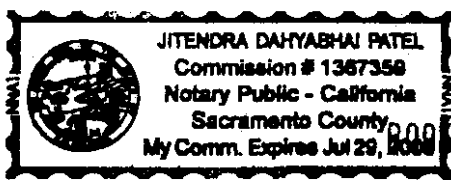
*[Signature]*  
\_\_\_\_\_  
Witness

STATE OF California  
:SS.  
COUNTY OF Sacramento

The foregoing instrument was acknowledged before me, JITENDRA PATEL, a notary public in and for the state of CA  
by me on the 5th day of Feb, 2004

Witness my hand and official seal

*[Signature]*  
\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Expires: 7/29/2006



185395

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**State of Nevada  
Declaration of Value**

1. Assessor Parcel Number(s)

- a) 005-720-07
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

2. Type of Property:

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

<b>FOR RECORDER'S OPTIONAL USE ONLY</b>	
Document/Instrument #	<u>185395</u>
Book: <u>375</u>	Page: <u>110</u>
Date of Recording:	<u>2/17/04</u>
Notes:	_____

3. Total Value/Sales Price of Property: \$ 9600.00

Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_

Transfer Tax Value: \$ \_\_\_\_\_

Real Property Transfer Tax Due: \$ 31.20 39.00

4. **If Exemption Claimed:**

a. Transfer Tax Exemption, per NRS 375.090, Section: \_\_\_\_\_

b. Explain Reason for Exemption: \_\_\_\_\_

5. Partial Interest: Percentage being transferred: 100 %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information 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 therein. Furthermore, the 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 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Capacity Grantor(s)

Signature \_\_\_\_\_ Capacity Grantee(s)

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

Print Name: Mike Kincade  
 Address: P.O. Box 2802  
 City: Rancho Cordova  
 State: CA Zip 95741

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

Print Name: Andrew & Kimberly Anderson  
 Address: P.O. Box 0489  
 City: Eustis  
 State: FL Zip 32727

**COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)**

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_