

DOC # 0224235

05/20/2013

01:20 PM

Official Record

Recording requested By
MIKE KINCADE

Eureka County - NV
Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPT: \$9.75

Recorded By: FES

Book- 549 Page- 0301



0224235

ASSESSOR PARCEL NO. 005-320-11
NOTE: Deed prepared by Grantor below.
NAME: MIKE KINCADE
ADDRESS: 3900 HANCOCK DR.
CITY/ST/ZIP: SACRAMENTO, CA 95821

WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):
NAME: DOUGLAS WILSON
ADDRESS: 4044 E SPRINGDALE/HUNTERS RD
CITY/ST/ZIP: SPRINGDALE, WA 99173

SPECIAL WARRANTY DEED

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are.

MIKE KINCADE

Does convey and specially warrants to:

DOUGLAS WILSON

Grantee, the following described real property free of encumbrances created by the Grantor, situated in:

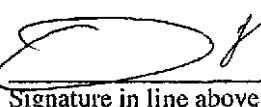
EUREKA COUNTY, NEVADA

T3DN R49E SEC. 25 NE4NW4SE4

Witness Whereof, my hand has been set on

May 14

2013



Signature in line above

Signature on line above

MIKE KINCADE

Print on line above

Print on line above

On May 14, 2013 By

Witness my hand and official seal

See Trust Stamp

Notary Public in and for said County and State

My commission expires on: May 31 2014

State of California, County of Sacramento
Subscribed and sworn to (or affirmed) before me on this
14 day of May, 2013, by
Mike Kincade
proved to me on the basis of satisfactory evidence to be
the person(s) who appeared before me.
Signature: Sarah Ashley Stockton (seal)



STATE OF NEVADA
DECLARATION OF VALUE

DOC # DV-224235

05/20/2013

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Official Record

1. Assessor Parcel Number (s)

a) 005-320-11
b) _____
c) _____
d) _____

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Book:

Date of l

Notes:

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Page 1 of 1 Fee: \$14.00

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2. Type of Property:

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

3. Total Value/Sales Price of Property:

\$ 2076 -

Real Property Transfer Tax Due:

(Tax is computed at \$1.95 per \$500 value)

\$ 9.75

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 herein. 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 MIKE KINKADE

Capacity GRANTOR

Signature DOUGLAS WILSON

Capacity GRANTEE

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: MIKE KINKADE
Address: 2900 HANCOCK DR
City: SACRAMENTO
State: CA Zip: 95821

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: DOUGLAS WILSON
Address: 4044 G SPRINGDALE/HUNTERS RD
City: SPRINGDALE
State: WA Zip: 99173

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____

Escrow # _____

Address: _____

City: _____

State: _____

Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)