

DOC # 0225156

11/18/2013

09:36 AM

**Official Record**

Recording requested By  
MIKE KINCADE

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT: \$7.80

Recorded By: AP

Book- 557 Page- 0227



0225156

ASSESSOR PARCEL NO. 005-420-30

NOTE: Deed prepared by Grantor below.

NAME: MIKE KINCADE

ADDRESS: 4720 LOMA LOMONDO DR.

CITY/ST/ZIP: CARMICHAEL, CA 95608

WHEN RECORDED MAIL TO (GRANTEE):

MAIL TAX STATEMENTS TO (GRANTEE):

NAME: JAY CHERAMIE

ADDRESS: 2710 WILSON RD #395

CITY/ST/ZIP: HUMBLE, TX 77396

**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:

JAY CHERAMIE

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

EUREKA COUNTY, NEVADA

T29N R48E, SEC. 1, SW4NE4NE4

Witness Whereof, my hand has been set on

Nov 6

, 2013

Signature in line above

Print on line above

MIKE KINCADE

Signature on line above

Print on line above

Jay Cheramie  
Jay Cheramie

State of California, County of Sacramento

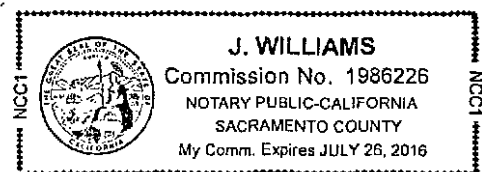
Subscribed and sworn to (or affirmed) before me on this

6 day of Nov, 2013 by

Michael Kincaide

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature [Signature] (seal)



STATE OF NEVADA  
DECLARATION OF VALUE

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1. Assessor Parcel Number (s)

a) 005-420-30  
b) \_\_\_\_\_  
c) \_\_\_\_\_  
d) \_\_\_\_\_

2. Type of Property:

a) <input checked="" type="checkbox"/>	Vacant Land	b) <input type="checkbox"/>	Single Fam Res.
c) <input type="checkbox"/>	Condo/Twnhse	d) <input type="checkbox"/>	2-4 Plex
e) <input type="checkbox"/>	Apt. Bldg.	f) <input type="checkbox"/>	Comm'l/Ind'l
g) <input type="checkbox"/>	Agricultural	h) <input type="checkbox"/>	Mobile Home
i) <input type="checkbox"/>	Other		

3. Total Value/Sales Price of Property:

\$ 1739 -

Real Property Transfer Tax Due:

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

\$ 7.80

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 JAY CHERANIE Capacity GRANTEE  
Signature MIKE KINCADE Capacity GRANTOR

SELLER (GRANTOR) INFORMATION

BUYER (GRANTEE) INFORMATION

(REQUIRED)		(REQUIRED)	
Print Name:	<u>MIKE KINCADE</u>	Print Name:	<u>JAY CHERANIE</u>
Address:	<u>4720 LOCH LOMOND DR</u>	Address:	<u>2710 WILSON RD #385</u>
City:	<u>CARMICHAEL</u>	City:	<u>HAMBIE</u>
State:	<u>CA</u> Zip: <u>95608</u>	State:	<u>TX</u> Zip: <u>77394</u>

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)