

QUIT CLAIM DEED

APN: 003-241-03

DOC # 0226991

02/20/2014 11 21 AM

Official Record

Recording requested By
EUREKA COUNTY TREASURER

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

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RPTT: \$1.95

Recorded By: LLH

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RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Mike Kincade
Address: 4720 Loch Lomond Dr.
City/State/Zip: Carmichael, CA 95608



0226991

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY
TREASURER, TRUSTEE, (Patricia Tucker & Robert A. Sanchez) for and in consideration of
Two Hundred Eighty-Five Dollars and Five Cents (\$285.05) do hereby QUIT CLAIM the right,
title and interest, if any, which GRANTOR(S) may have in all that real property, the receipt of which
is hereby acknowledged, to the GRANTEE(S): Mike Kincade whose address is (if applicable):
4720 Loch Lomond Dr., situate in the Town of Carmichael, State of California.

All that certain property in the County of Eureka, State of Nevada bounded and described as follows:

**Nevelco Inc. Unit 2
T29N R48E, Sec. 15 Lot 3, Block Y**

Together with all and singular hereditament and appurtenances thereunto belonging or in any way
appertaining to. In Witness Whereof, I/We have hereunto set my hand/our hands on February 20,
2014.

Beverly Conley
Signature of Grantor

STATE OF NEVADA)

COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) February 20, 2014
By (person(s) appearing before notary public) Beverly Conley * * *

Diane D. Podborny
Notary Public

My Commission expires: March 12, 2017



DIANE D. PODBORNY
NOTARY PUBLIC
STATE OF NEVADA
Appt. No. 13-10500-8
My Appt. Expires March 12, 2017

STATE OF NEVADA
DECLARATION OF VALUE

- a) 003-241-03
b) _____
c) _____
d) _____

02/20/2014 1 2:38 PM

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EUREKA COUNTY TREASURER

- 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

THE
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Mike Rebaleati - Recorder

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- \$ 294.29
\$ 1.95

- b. Explain Reason for Exemption:

- 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 parties agree that 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.

Signature Benny Carter Capacity Treasurer
Signature _____ Capacity _____

Print Name: Beverly Conley, Eureka Treasurer
Address: PO Box 677
City: Eureka
State: Nevada Zip: 89316

Print Name: Mike Kincade
Address: 4720 Loch Lomond Drive
City: Carmichael
State: California Zip: 95608

Print Name: _____ Escrow # _____
Address: _____
City: _____ State: _____ Zip: _____

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)