

DOC # 0227044

03/17/2014

01:22 PM

Official Record

Recording requested By
MIKE KINCADE

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$14.00

Page 1 of 1

RPTT: \$1.95

Recorded By: AP

Book- 563 Page- 0263



0227044

ASSESSOR PARCEL NO. 003-232-01
NOTE: Deed prepared by Grantor below.
NAME: MIKE KINCADE
ADDRESS: 4720 LOCH LEMOND
CITY/ST/ZIP: CARMICHAEL, CA 95608

WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):
NAME: JEANIE + MARK ALMA SR.
ADDRESS: 38306 ANITA CT.
CITY/ST/ZIP: FREMONT, CA 94536

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:

JEANIE AND MARK R. ALMA SR.

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

NEVELCO INC. UNITZ
T29N R48E, SEC 15 LOTS 1 AND 2, BLOCK R.

Witness Whereof, my hand has been set on

MARCH 6, 2014

Signature in line above

[Handwritten Signature]

Signature on line above

Print on line above

MIKE KINCADE

Print on line above

State of California, County of SACRAMENTO

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

6 day of MARCH, 2013 by

MIKE KINCADE

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

Signature: *[Handwritten Signature]* (seal)



STATE OF NEVADA
DECLARATION OF VALUE

DOC # DV-227044

03/17/2014 01:27 PM

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1. Assessor Parcel Number (s)

- a) 003-732-01
- 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'l/Ind'l
- g) Agricultural
- h) Mobile Home
- i) Other

3. Total Value/Sales Price of Property:

\$ 455,000

Real Property Transfer Tax Due:

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

\$ 3.90

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 KINGADE Capacity GRANTOR
Signature MARK ALMA Capacity GRANTEE

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: MIKE KINGADE
Address: 4720 CECIL MEND
City: CARMICHAEL TR
State: CA Zip: 95608

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: MARK + JEANIE ALMA SR
Address: 3830 ANITA CT
City: FREMENT
State: CA Zip: 94536

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)