

QUIT CLAIM DEED

APN: 005-020-34

DOC # **0229314**

05/06/2015 02:47 PM

Official Record

Recording requested By
EUREKA COUNTY TREASURER

Eureka County - NV

Sara Simmons - Recorder

Fee: \$14.00 Page 1 of 1
RPTT: \$31.20 Recorded By: LH
Book- 578 Page- 0266

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Michael Kincade, Trustee of the Michael
Kincade Revocable Trust of 2014

Address: 4720 Loch Lomond Drive

City/State/Zip: Carmichael, CA 95608



0229314

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY
TREASURER, TRUSTEE, (ABELSON, HARRY W. & ISABEL) for and in consideration of
Five Hundred Seventy Five Dollars and No Cents (\$575.00) 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): Michael Kincade, Trustee of the Michael Kincade
Revocable Trust of 2014 whose address is (if applicable): 4720 Loch Lomond Drive,
Carmichael, CA 95608.

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

T31N,R48E SEC. 33 SW4SW4

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 May 6, 2015.

Beverly Conley
Signature of Grantor

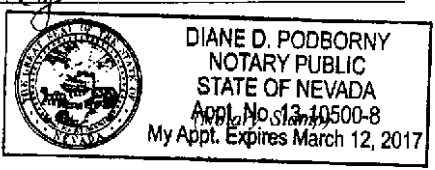
STATE OF NEVADA)

COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) May 6, 2015
By (person(s) appearing before notary public) Beverly Conley

Diane D Podborny
Notary Public

My Commission expires: March 12, 2017



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)
 a) 005-020-34
 b) _____
 c) _____
 d) _____

DOC # DV-229314
 05/06/2016 02:47 PM
Official Record

Recording requested By
 EUREKA COUNTY TREASURER

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 _____

Eureka County - NV
FC Sara Simmons - Recorder
 DC Page 1 of 1 Fee \$14.00
 BC Recorded By: LH RPTT: \$31.20
 DA Book- 578 Page- 0266
 NOTES: _____

3. Total Value/Sales Price of Property: \$ _____
 Deed in Lieu of Foreclosure Only (value of property) (_____
 Transfer Tax Value: \$ 7920.00
 Real Property Transfer Tax Due: \$ 31.20

4. If Exemption Claimed:
 a. Transfer Tax Exemption per NRS 375.090, Section # _____
 b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: _____ %

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.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Beverly Conley Capacity Eureka County Treasurer
 Signature _____ Capacity _____

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

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

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

Print Name: Kincade Michael, Trustee of the Michael Kincade
 Address: 4770 Loch Lomond Dr. Revocable Trust of 2014
 City: Carmichael
 State: California Zip: 95608

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/MICROFILMED)