## **QUIT CLAIM DEED**

APN: <u>005-480-15</u>

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name:

Michael Kincade, Trustee of the Michael

Kincade Revocable Trust of 2014

Address: <u>4720 Loch Lomond Drive</u> City/State/Zip: <u>Carmichael, CA 95608</u> DOC # 0229328

/06/2015 02.58 |

Official Record

Recording requested By EUREKA COUNTY TREASURER

Eureka County - NV Sara Simmons - Recorder

Fee: **\$14.00** RPTT: **\$**31.20 Page 1 of 1 Recorded By: LH

Book- 578 Page- 0280

720328

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY

TREASURER, TRUSTEE, (TROY, JAMES M. & LOUISE N.) for and in consideration of Two Thousand Dollars and No Cents (\$2000.00) 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:

T29N,R49E SEC. 7 SE4SW4

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 <u>May 6, 2015</u>.

Signature of Grantor

STATE OF NEVADA

COUNTY OF EUREKA

This instrument was acknowledged before me on (date)

By (person(s) appearing before notary public)

By (person(s) appearing before notary public)

Notary Public

My Commission expires:

March 12, 2017

STATE OF NEVADA

Appt. Mol. 13.40500-8

My Appt. Expires March 12, 2017

## STATE OF NEVADA DECLARATION OF VALUE

1. Assessors Parcel Number(s)	
a) 005-480-15 b)	DOC # DV-229328
b) c)	05/05/2015 02 58 PM
d)	Official Record
	Recording requested By EUREKA COUNTY TREASURER
2. Type of Property:	EC
a) 🔽 Vacant Land b) 🔲 Single Fam. Res.	DO Lureka County - NV
c) Condo/Twnhse d) 2-4 Plex	BO Sara Simmons - Recorder
e)	DA Page 1 of 1 Fee: \$14,00 NC Recorded By: LH RPTT: \$31.20
i) Other	Book- 578 Page- 0280
1) Outer	
3. Total Value/Sales Price of Property:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Deed in Lieu of Foreclosure Only (value of pro	perty) (
Transfer Tax Value:	\$ 7920.00
Real Property Transfer Tax Due:	\$31.20
4 10 0 1 01 1	
4. If Exemption Claimed:  a. Transfer Tax Exemption per NRS 375.0	NOO Section #
b. Explain Reason for Exemption:	770, Section #
o. Explain Reason for Exemption.	
5. Partial Interest: Percentage being transferred:	%
	nder penalty of perjury, pursuant to NRS 375.060 and
	correct to the best of their information and belief, and can
be supported by documentation if called upon t	e of any claimed exemption, or other determination of
additional tax due may result in a penalty of 10	0% of the tax due plus interest at 1% per month.
against adopting 7 court in a pointing of 1	, , , , , , , , , , , , , , , , , , , ,
Pursuant to NRS 375.030, the Buyer and Seller sha	ll be jointly and severally liable for any additional
amount owed.	/ /
Signature Beverly Lowley	Capacity Eureka County Treasurer
Signature \	Capacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: Beverly Conley, Treasurer Pr	int Name: Kincade, Michael, Trustee of the Michael Kincade
Address: PO Box 6/7 A	ddress: 4720 Loch Lomand DR. Revocable Trust of a
City: Eureka C	ity: <u>Carmichael</u> ate: <u>California</u> Zip: 95608
State:         NV         Zip: 89316         St	ate: <u>California</u> Zip: 95608
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer)	
Print Name:	Escrow#
Address:	
City: State: (AS A PUBLIC RECORD THIS FORM	Zip:
(AS A PUBLIC RECORD THIS FORM	1 MAY BE RECORDED/MICROFILMED)