EUREKA COUNTY, NV

RPTT:\$1.95 Rec:\$35.00

Total:\$36.95

2018-234759

MICHAEL KINCADE

02/22/2018 01:14 PM

Pgs=2

ASSESSOR PARCEL NO. 005-320-02 NOTE: Deed prepared by Grantor below.

NAME: Linda A. Hovey ADDRESS: P.O. Box 672

CITY/ST/ZIP: Aquila, AZ 85320

WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):

NAME: Michael Kincade, Tr ADDRESS: 4720 Loch lomond Dr CITY/ST/ZIP: Carmichael, CA 95608



LISA HOEHNE, RECORDER

SPECIAL WARRANTY DEED

FAILE PRICE

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are.

Linda A. Hovey

Does conveys and specially warrants to:

Michael Kincade Trustee of the Michael Kincade Revocable Trust of 2014

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

Eureka County, Nevada

T30N, R49E SEC. 25 POR OF E2W2W2 3.0 AC

Apn# 005-320-02

· · · · · · · · · · · · · · · · · · ·	Aprim 000-020-02	The State of the S	
Witness Whereof, my hand has been	en set on	2-14	.20 /8
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1
Signature in line above			
Signature in line above		S	ignature on line above
Linda A Hovey	\	\	
Print on line above			Print on line above
And And		1	

State of California, County of Mancopa
Subscribed and sworn to (or affirmed) before me on this
day of Hongard, 2018 by

Indo H. Hovey,

proved to me on the basis of satisfactory evidence to be the person(1) who appeared before me.

Signature Company of the person of the perso

(seal)



STATE OF NEVADA DECLARATION OF VALUE

1. Assesso	or Parcel Numb	per(s)			/··\
a) ;	105-	320-07			\ \
b)	V		•		\ \
c)			•		\ \
d)			3		\ \
2. Type of			•	FOR RECORDERS OF	TIONAL USE ONLY
	ecant Land	b) Single Fam. Res.		Document/Instrument #	HONAL USE ONLY
c) C	ondo/Twnhse	d) 2-4 Plex		D. 1	
e) A	pt. Bldg	f) Comm'l/Ind'i		Date of Recording:	Page:
g) A	gricultural	h) Mobile Home		Notes:	
	ther			Notes.	
Total V	'alue/Sales Prid	e of Property	- \$	300 -	
Deed in	Lieu of Foreclo	sure Only (value of property	y A	1 200	
Transfe	er Tax Value:	, come of property	·) \$)
Real F	Property Transf	er Tax Due	\$	10:	
			J 4		
4. If Exem	nption Claimed	<u>i:</u> /			\
a. T	ransfer Tax Exe	mption per NRS 375.090, S	ection	\	1
b. E	xplain Reason	for Exemption:			
_			N _		
5. Partia	I Interest: Perc	entage being transferred:	159	2%	
			//		
ine	undersigned d	eclares and acknowledge	s, und	er penalty of periury, purs	uant to NRS 375 060
and NRS	3/5.110, that th	ne information provided is	correc	t to the best of their inform	uant to NRS.375.060 mation and belief, and can be
anhhousen	by documenta	tion if called upon to subs	tantiat	e the information provided	mation and belief, and can be d herein. Furthermore, the
result in a	nonality of 4000	wance of any claimed exe	emption	i, or other determination of	d herein. Furthermore, the of additional tax due, may
and Seller	penalty of 10%	of the tax due plus intere	est at 1	% per month. Pursuant to	of additional tax due, may o NRS 375.030, the Buyer
and deliei	sitali de jolitiy	and severally liable for a	ny add	itional amount owed.	ary me bayer
	1/30	1 1 11 /-	344		
Signature	450	A H.HOVE	\sim \setminus	1	/
Signature	MIYO	1/1A/AIDE		Capacity CollA-	9
-	111	MICHE		Capacity (1)	7/4
SE1	LED (OD the	<u>\</u>		\ \	
SEL	LER (GRANT	OR) INFORMATION		BUYER (GRANTEE)	INFORMATION
400	REQUIRED)	1 11 1		(REQUIRED)	/
Name _	11/1/4	A HOVEX		MICHAELK	NA Arm
Address:	10.150	672	7	4778 18	4/0/45/200
City: /_	Maye	9		ADMICHA	EL CASONI IN
State: _	_172/	Zip 85300	-	77 - 47 10	77 71605
COSSUAN	NIDEDAA:				
Orint Na	TIPERSON RE	QUESTING RECORDIN	G (reg	uired if not seller or buy	/er)
	ie:			Escrow #	
Address:_					
City:		State:		Zip:	
		1 %		10.	

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