

EUREKA COUNTY, NV
RPTT: \$19.50 Rec: \$35.00
Total: \$54.50
LLOYD DOUGLAS KING

2018-235769
08/08/2018 11:26 AM

Pgs=3

ASSESSOR PARCEL NO. 003-103-05
NOTE: Deed prepared by Grantor below.
NAME: Michael Kincade
ADDRESS: 4720 Loch Lomond Dr
CITY/ST/ZIP: Carmichael, CA 95608

WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):
NAME: Lloyd Douglas King
ADDRESS: 2845 Green St
CITY/ST/ZIP: Merced, CA 95340



00002259201802357690030035

LISA HOEHNE, RECORDER

SPECIAL WARRANTY DEED

SALE PRICE
\$500 -

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

Mike Kincade

Does convey and specially warrants to:

Lloyd Douglas King

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

Eureka County, Nevada

CVR&F Unit #4, Lot 7, Block 15

460 N 9th Street

Witness Whereof, my hand has been set on

Aug 6, 2018

Signature in line above

Print on line above

Signature on line above

Print on line above

State of California, County of

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

day of

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

Signature (seal)

*please see attached
CA Acknowledgement
form.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of Sacramento)

On 8-6-18 before me, Haley Van Wagner, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Michael Kincaid
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~is/are~~ subscribed to the within instrument and acknowledged to me that ~~he/she/they~~ executed the same in ~~his/her/their~~ authorized capacity(ies), and that by ~~his/her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Haley Van Wagner
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Special Warranty Deed
Document Date: none Number of Pages: 1
Signer(s) Other Than Named Above: none

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: _____
Signer Is Representing: _____

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☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: _____
Signer Is Representing: _____

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessor Parcel Number(s)

a) 003-103-05
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
Other _____

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument #: _____
Book _____ Page: _____
Date of Recording: _____
Notes: _____

3. Total Value/Sales Price of Property

Deed in Lieu of Foreclosure Only (value of property)

Transfer Tax Value:

Real Property Transfer Tax Due

\$ 5,000 -
\$ _____
\$ 19.50

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 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 _____

Signature _____

Capacity GRANTOR

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Name: MIKE KINZIE
Address: 720 CLOVERLAND DR
City: CARMICHAEL
State: CA Zip: 95608

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Name: WYATT D. KINZIE
Address: 2845 GREEN ST
City: MERCED, CA Zip: 95340

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____

Escrow # _____

Address: _____

City: _____

State: _____

Zip: _____

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