

QUIT CLAIM DEED

APN: 005-170-08

EUREKA COUNTY, NV
LAND-QTD
RPTT:\$23.40 Rec:\$37.00
Total:\$60.40

2020-241884
09/08/2020 10:51 AM
Pgs=2

MICHAEL KINCADÉ



00009126202002418840020029

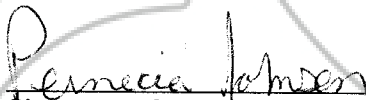
LISA HOEHNE, CLERK RECORDER

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: **Michael Kincade**
Address: **4720 Loch Lomond Dr.**
City/State/Zip: **Carmichael, CA 95608**

THIS INDENTURE WITNESS That the GRANTOR(S): **EUREKA COUNTY**
TREASURER, TRUSTEE, (Farr, Dr. Ellsworth J. & Irene) for and in consideration of **Three**
Thousand Six Hundred Twenty Six Dollars and fifty-seven cents** (\$3,626.57)** 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 Dr., situate in the Town of **Carmichael,** State of **California.**
All that certain property in the County of Eureka, State of Nevada bounded and described as follows:
T30N,R48E SEC. 1, Lot 1

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
September 8, 2020.

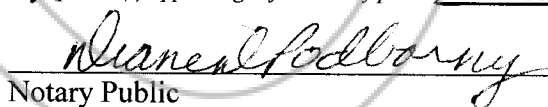

Signature of Grantor

STATE OF NEVADA)

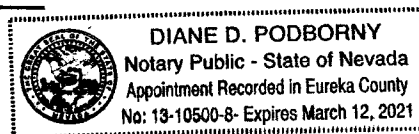
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) **8th day of September, 2020.**

By (person(s) appearing before notary public) **Pernecia Johnson**


Notary Public

My Commission expires: **March 12, 2021**



(Notary Stamp)

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)

a) 005-170-08
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 _____

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:

\$ _____
(_____
\$ \$5,783.00
\$ \$23.40

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 _____

Capacity _____

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

Print Name: Pernecia Johnson

Address: PO Box 677

City: Eureka

State: NV Zip: 89316

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

Print Name: Michael Kincade

Address: 4720 Loch Lomond Dr.

City: Carmichael

State: CA 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)