

# QUIT CLAIM DEED

APN: 009-190-01

EUREKA COUNTY, NV  
LAND-QTD  
RPTT:\$9.75 Rec:\$37.00  
Total:\$46.75

**2020-241887**  
**09/08/2020 10:51 AM**  
Pgs=2

MICHAEL KINCADE



00009129202002418870020029

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, (Padgitt, Lucille et al)** for and in consideration of **Twenty Five**  
**Thousand Five Hundred Fifty One Dollars and no cents\*\*\*\* (\$25,551.00)** 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 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:

**DIAMOND MINING DISTRICT**  
**Patent #1693 Champion Survey #37A**  
**Patent #1693 Champion Millsite Survey #37B**  
**T21 1/2, R54E SEC. 36 & T22N, R54E SEC. 35**

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.

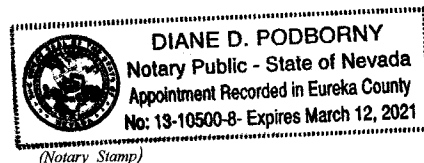
Pernecia Johnson  
Signature of Grantor

STATE OF NEVADA )  
COUNTY OF EUREKA )

This instrument was acknowledged before me on (date) 8<sup>th</sup> day of September, 2020.

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

Diane D. Podborny  
Notary Public  
My Commission expires: March 12, 2021



STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessors Parcel Number(s)

a) 009-190-01  
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: \_\_\_\_\_

\$ \_\_\_\_\_  
( \_\_\_\_\_  
\$ \$2,143.00  
\$ \$9.75

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 Pernecia Johnson

Capacity Treasurer

Signature \_\_\_\_\_

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: 85608

**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)