

APN: 005-430-20

RECORDED AT THE REQUEST OF,
WHEN RECORDED, RETURN TO AND
MAIL TAX ASSESSMENTS TO:

Nevada Gold Mines LLC
1655 Mountain City Highway
Elko, NV 89801
Attn: Land Department

EUREKA COUNTY, NV

RPTT:\$39.00 Rec:\$37.00

\$76.00 Pgs=3

STEWART TITLE ELKO

LISA HOEHNE, CLERK RECORDER

2021-244592

03/23/2021 10:17 AM

Affirmation Statement: The undersigned affirms that this document does not contain any social security numbers or other personal information of any person (Per NRS 239B.030).

GRANT, BARGAIN AND SALE DEED

Nevada Gold Mines LLC, a Delaware limited liability company, with an address of 1655 Mountain City Highway, Elko, NV 89801 ("Grantee") and Michael Kincade, trustee of the Michael Kincade Revocable Trust of 2014 with an address of 4720 Loch Lomond Drive, Carmichael, CA 95608 ("Grantor"), its successors and assigns, for Ten Dollars (\$10.00) and other good and valuable consideration, all of Seller's rights, title and interest in and to the real property situated in Eureka County, State of Nevada ("Property") more particularly described as follows:

Parcel No. 005-430-20

Township 29 north, Range 48 East, M.D.B.&M.

Section 11: NE4SE4SW4

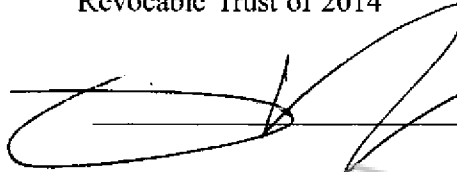
TOGETHER WITH (i) all rights, privileges, easements, rights-of-way, tenements, hereditaments and appurtenances relating, belonging, or in anywise appertaining, to the Property; and (iii) the reversion and reversions, remainder and remainders, rents, issues and profits of the Property.

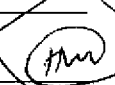
GRANTOR hereby represents, warrants and covenants to Grantee that (i) Grantor lawfully owns fee simple title to and has the right to immediate possession of the Property; (ii) Grantor has good right to convey the Property; (iii) Grantor guarantees that Grantee and Grantee's successors and assigns will have quiet possession of the Property; (iv) subject to easements, restrictions, rights-of-way and other matters of record, the Property is free from all encumbrances; and (v) Grantor and its heirs, personal representatives, successors and assigns, as applicable, will forever warrant and defend the title of the Property in Grantee and Grantee's successors and assigns against all lawful claims whatsoever.

GRANTOR has executed this Grant, Bargain and Sale Deed as of Feb 17, 2021.


GRANTOR:


Michael Kincade, trustee Michael Kincade
Revocable Trust of 2014

 TRUSTEE

STATE OF
COUNTY OF ss. 

The foregoing instrument was acknowledged before me this day of ,
2021 by Michael Kincade, trustee Michael Kincade Revocable Trust of 2014.

*Please see attached CA
Acknowledgment form, incorrect
wording for CA Notary Public here 
Notary Public

My Commission Expires: 

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 2-18-2021 before me, Halley Van Wagner, Notary Public,
(Here insert name and title of the officer)

personally appeared Michael Kincaid,
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.



Halley Van Wagner
Notary Public Signature (Notary Public Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Grant, Bargain, And Sale Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 2 Document Date none

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he~~/~~she~~/~~they~~ - is are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ✦ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ✦ Indicate title or type of attached document, number of pages and date.
 - ✦ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

State of Nevada

Declaration of Value

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument # _____

Book: _____

Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number(s)

a) 005-430-20

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 _____

3. Total Value/Sales Price of Property:

\$ 10,000.00

Deed in Lieu of Foreclosure Only (value of property)

\$ _____

Transfer Tax Value per NRS 375.010, Section 2:

\$ 39.00

Real Property Transfer Tax Due:

\$ 39.00

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 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 _____

Capacity

Signature _____

Capacity

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Michael Kincade, trustee

Address: 4720 Loch Lomond Drive

City: Carmichael

State: CA

Zip: 95608

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Nevada Gold Mines LLC

Address: 1655 Mountain City Highway

City: Elko

State: NV

Zip: 89801

COMPANY REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____

Escrow # _____

Address: _____

City: _____

State: _____

Zip: _____