

QUIT CLAIM DEED

APN: 003-242-03

EUREKA COUNTY, NV

LAND-QTD

RPTT:\$1.95 Rec:\$37.00

Total:\$38.95

MICHAEL KINCADE

2021-244743

05/10/2021 09:29 AM

Pgs=2

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

Name: Michael Kincade

Address: 4720 Loch Lomond Dr.

City/State/Zip: Carmichael, CA 95608



00012166202102447430020028

LISA HOEHNE, CLERK RECORDER

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY
TREASURER, TRUSTEE, (JONES, RON) for and in consideration of Five Hundred Two
Dollars and fifty-six cents****(\$502.56) 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:

NEVELSO INC. #2
T29N,R48E SEC. 15, BLOCK X, LOT 3

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 May 10, 2021.

Pernecia Johnson

Signature of Grantor

STATE OF NEVADA)

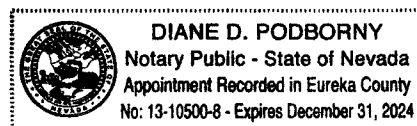
COUNTY OF EUREKA)

This instrument was acknowledged before me on (date) May 10, 2021

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

Diane D. Podborny
Notary Public

My Commission expires: December 31, 2024



(Notary Stamp)

STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)

a) 003-242-03
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:

\$ _____
(_____
\$ \$269.00
\$ \$1.95

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, Treasurer

Address: PO Box 677

City: Eureka

State: NV Zip: 89316

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

Print Name: Michael Kincade Revocable Trust

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)