

QUIT CLAIM DEED

APN: 002-047-09

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO

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

EUREKA COUNTY, NV
LAND-QTD
RPTT \$27.30 Rec:\$37.00
Total:\$64.30

2021-244744

05/10/2021 09:30 AM

Pgs=2

MICHAEL KINCADE



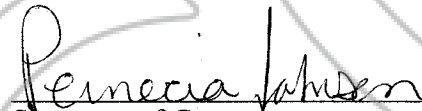
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LISA HOEHNE, CLERK RECORDER

THIS INDENTURE WITNESS That the GRANTOR(S): EUREKA COUNTY
TREASURER, TRUSTEE, (PEASLEY, R & NICKLIN, W.) for and in consideration of
Twelve Thousand Five Hundred One Dollars and fifty-six cents**** (\$12,501.56) 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:

**CVR&FU#1, Block 38, Lot 6
5005 Tenabo Avenue**

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.



Signature of Grantor

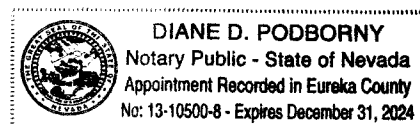
STATE OF NEVADA)

COUNTY OF EUREKA)

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

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


Notary Public
My Commission expires: December 31, 2024



STATE OF NEVADA
DECLARATION OF VALUE

1. Assessors Parcel Number(s)

a) 002-047-09
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: \$ \$6,531.00
\$ \$27.30

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)