

ASSESSOR PARCEL NO. 005-650-21
NOTE: Deed prepared by Grantor below.
NAME: Michael Kincade Tr
ADDRESS: 4720 Loch Lomond Dr
CITY/ST/ZIP: Carmichael, CA 95608

RPTT: 70.00
WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):
NAME: James R. Vavrin
ADDRESS: 4401 Little Rd Ste 550-323
CITY/ST/ZIP: Arlington, TX 76016

EUREKA COUNTY, NV
LAND-WAD
RPTT:\$70.20 Rec:\$37.00
Total:\$107.20

2021-246357
09/15/2021 01:28 PM

Pgs=3

MICHAEL KINCADE



00013868202102463570030031

LISA HOEHNE, CLERK RECORDER

SPECIAL WARRANTY DEED

SALE PRICE \$120000

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are.

Michael Kincade Trustee of the Michael Kincade Revocable Trust of 2014

Does convey and specially warrants to:

James Randall Vavrin a Single Man

Grantee, the following described real property free of encumbrances created by the Grantor, situated in:

Eureka County, Nevada

The W1/2 of the NW1/4 of Township 28 North, Range 51 East, Sec 13, M.D.B. & M.

APN# 005-650-21

Witness Whereof, my hand has been set on

SEPT 14, 2021

Signature on line above

[Signature]
Michael Kincade Tr

Signature on line above

Print on line above

Print on line above

State of California, County of _____

Subscribed and sworn to (or affirmed) before me on this

_____ day of _____, _____ by _____

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature _____ (seal)

(Am)

**Please see attached CA Notary document.*

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)

- a) 005-1050-21
- 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
- Other _____

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____
Date of Recording: _____
Notes: _____

3. Total Value/Sales Price of Property

\$ 18,000 -

Deed in Lieu of Foreclosure Only (value of property) _____

Transfer Tax Value: _____

\$ _____

Real Property Transfer Tax Due _____

\$ 70.20

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 GRANTOR

Signature _____ Capacity _____

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

Print Name: MICHAEL VALENTI
Address: 4720 LEATH LANE
City: CHEMUNO
State: CA Zip: 95008

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

Print Name: JANET R. VALENTI
Address: 4749 LIME RD STE 55-323
City: ARLINGTON
State: TX Zip: 76016

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____ Escrow #: _____
Address: _____
City: _____ State: _____ Zip: _____

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED