Merits: 0011838938442 Trips: 8181140690085



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	12RETTD*	DECLARATION	K IAX	
RETTD		36 M.R.S. §§ 4641-464	IN	
1. County				03/01/2018 02:55 PM
SAGADA	HOC			2018R-01320 Transfer Tax of 653,40
2. Municipality	y/Township			State of Maine Transfer Tax
BATH				sagadahoc county maine 2018 — 1320
3. GRANTEE/				BOOK/PAGE—REGISTRY USE ONLY
PURCHASER	30) Name LAST or BUSINESS, FIRS HOLT, JOHN A			
	ac) Name LAST or BUSINESS. FIRS	T.MI		
	3e) Mailing Address after purchase P.O. BOX 440	of this property		
	30 City GEORGETOWN			3gr.state 3jr.j.2jr.code ME 04548
4. GRANTOR/	4a) Name, LAST or BUSINESS, FIRS			
SELLER	WARNER, CHRI			
	AclName_LAST.or.BUSINESS.EIRS	i+MI		_
	4e) Mailing Address			J
	29 DENNY ROA	D		
	4f) City			4g) State 4h) ZIP Code
	BATH			ME 04530
5.PROPERTY	5a) Map Block 19 5c) Physical Location 49-51 DENNY F	Lot Sub-Lot 74		ps exist 5d) Acreage arcels
6. TRANSFER TA	AX 6a) Purchase Price (If t	ne transfer is a gift, enter "0")	6	148,5001.00
	6b) Fair Market Value (if 6a) was of nominal v	enter a value only if you entered "0" alue)	-	,00.
	6c) Exemption claim –	Check the box if either grantor or grai	ntee is claiming exemp	tion from transfer tax and explain.
63-0 MONTH	01-2018 fr DAY YEAR	ont a substantial financial penalty could	be triggered by develo	Open Space, Tree Growth, or Working Water- pment, subdivision, partition or change in use. CLASSIFIED
in the transfer w	CUMSTANCES—Were there any solutions are suggested that the price paid	was either more or less	NCOME TAX WITHHEL	D-Buyer(s) not required to withhold Maine income tax because:
than its fair mar	ket value? If yes, check the box a	nd explain:		has qualified as a Maine resident
			Consid	rer has been received from the State Tax Assessor deration for the property is less than \$50,000 osure sale
11. OATH	our knowledge and belief, it	is true, correct, and complete. Grantee(s)	and Grantor(s) or their	have each examined this return and to the best of authorized agent(s) are required to sign below: Date 2 2020 8
12. PREPARER	Name of Preparer Jenny Burg		Grantor	Date
	Mailing Address 23 Centre	· · · · · · · · · · · · · · · · · · ·	Phone Numb Email Addres	lonnuhumh207@amail.com
		E 04530	Fax Number	207,443,3333

Rev. 12/15

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840021980

Registry	Sagadahoc
Date Recorded	03/02/2018
Time Recorded	10:49:00 AM
ansfer Tax Amount	\$895.40
Document Number	2018r-01328

<u>KE</u>	עוו	TITLE 36, M.R.S.A. SECTIONS §	§§4641-4641N	Transfer	Tax Amount	\$895.40	***
Sagadaho	oc						
1. County				Docu	ment Number		128
BATH					Book	2018	
2. Municipality	r/Township				Page	1328	
3. GRANTEE/				E	BOOK/PAGE—REG	SISTRY USE ONLY	
PURCHASER	WHEELER	SUSAN	•	<u></u> С.			
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Fede	eral ID	
	WHEELER	BLAKE		W.			
	3c) Name (LAST)	(FIRST)		(Mi)	3d) SSN or Fede	eral ID	
	739 HIGH S	TREET					
	3e) Mailing Address						
	BATH				ME		
4, GRANTOR/	3f) City				3g) State	3h) Zip Cod	e
SELLER	PARKER	ELLEN		M.			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Fede	ral ID	
	Ash Name (LACT)	(FIDET)					
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Fede	ral ID	
	4e) Mailing Address	OORWILL ROAD		_			
	LITCHFIEL	D				04250	
	4f) City	<u> </u>			ME		ode
5. PROPERTY			5b) Tyr	oe of property—En	ter the code numbe	er that best	
	27	18	Check an	es the property bei ny that apply:	ing sold . (See instruc	ctions)—» 202	!
	5a) Map	Block Lot Sub-Lot	· -	tax maps exist			
	739 HIGH S	TREET		ultiple parcels rtion of parcel	0.60		
C TOANCEED TA	5c) Physical Location			reion of pareer	5d) Acreage		
6. TRANSFER TA	6a) Purchase I	Price (If the transfer is a gift, enter "0")		6a \$2	03,500		.00
		et Value (enter a value only if you entered	"0" in 6a) or				Ē
	if 6a) was of n	ominal value)		6b			00
	6c) Exemption	claim – Check the box if either grantor or	grantee is claiming	g exemption fro	n transfer tax and	d explain.	
7. DATE OF TRA	NSFER (MM-DD-YYY)		y is classified as Far	rmland, Open Sp	oace, Tree Growth	ı, or Working Wat	er-
03	01 2018	front a substantial financial penalty co	uld be triggered by	y development,	subdivision, parti		
MONTH O SPECIAL CIRC	DAY YEAR	here any special circumstances 1	O INCOME TAX W	THUE! O Down	(a) a a b us a	CLASS	
in the transfer w	hich suggest that the p	price paid was either more or less	O. INCOME TAX W	•	er(s) not required me tax because:	to withhold Mair	ne .
than its fair marl	ket value? If yes, check	the box and explain:	X		lified as a Maine r		
			 	-	een received fror for the property		
				Foreclosure Sa		15 1055 (11411 \$50,0	700
11. OATH	Aware of penalti	es as set forth by Title 36 §4641-K, we hereby	swear or affirm the	at we have each	examined this re	turn and to the i	oest of
		belief, it is true, correct, and complete. Grante M. PARKER Date 03/05/201) or their authori JSAN C. WH		required to sign b Date03/05	
	Grantee	Date 03/05/201	_	AKE W. WI		Date 03/05 Date 03/05	5/2018
12. PREPARER	Name of Preparer	JOHN T. VOORHEES, JR.	Granter	e Number <u>(20</u>		Date	
	Mailing Address	13 PLEASANT STREET			hite@midcoasttitl	e.com	
		BRUNSWICK, ME 04011		lumber			

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840022001

Registry	Sagadahoc
Date Recorded	03/02/2018
Time Recorded	11:02:00 AM
Transfer Tax Amount	\$1,210.00
Document Number	2018r-01330
Book	2018

RE	TTD	TITLE 36, M.R.S.A	A. SECTIONS §§4641-	-4641N		ded 11:02:00 AM
Sagadaho	20			Tran	isfer Tax Amo	ount \$1,210.00
1. County	<u> </u>			D	ocument Num	nber <u>2018r-01330</u>
BATH					В	ook <u>2018</u>
2. Municipality	v/Township				P	Page 1330
3. GRANTEE/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				BOOK/PAGE-	REGISTRY USE ONLY
PURCHASER	ANDERSON 3a) Name (LAST)	(FIRST)		C (MI)	3b) SSN o	r Federal ID
	COLEMAN 3c) Name (LAST)	SARAI (FIRST)	H 	H (MI)	3d) SSN o	r Federal ID
	119 NORTH 3e) Mailing Address	STREET	·			
	BATH 3f) City					ME 04530 State 3h) Zip Code
4. GRANTOR/ SELLER	SAILER 4a) Name (LAST)	BRIAN	1	J (мі)		r Federal ID
	SAILER 4c) Name (LAST)	MELIS (FIRST)	SSA	M (MI)	4d) SSN or	r Federal ID
	P.O. BOX 500	5				
	EAST DORS	ЕТ				VT 05253
5. PROPERTY	4i) city		7	5b) Type of property		4g) State 4h) Zip Code
	26 5a) Map	Block Lot	Sub-Lot	describes the proper Check any that apply No tax maps e Multiple parce	y: exist	302
	5c) Physical Location	JIKED I		Portion of pare		
6. TRANSFER TA	6a) Purchase Pr		ŕ	6b	\$275,000	.00 .00 ax and explain.
7. DATE OF TRA	ANSFER (MM-DD-YYYY)		R–If the property is classif			
02 MONTH	28 2018 DAY YEAR	front a substantial finar	ncial penalty could be tri	ggered by developm	ent, subdivision,	partition or change in use. CLASSIFIED
in the transfer w		ere any special circumstances ice paid was either more or le ne box and explain:		X Seller has A waiver h	income tax becan qualified as a Manas been received ation for the prop	
11. OATH	Aware of penalties	s as set forth by Title 36 §464	11-K, we hereby swear or	affirm that we have	each examined t	his return and to the best of
	Grantee BRIAN J	pelief, it is true, correct, and co SAILER Date		Grantor(s) or their autor MILLIAM(
		Date		SARAH H C		Date 03/05/2018
12. PREPARER	Name of Preparer	ERIC SCHAEFFER		Phone Number		
	Mailing Address	45 FOREST FALLS DRIVE		_ E-Mail Address .	closings@doug	lastitle.com
	_	YARMOUTH, ME 04096		_ Fax Number .		

Merits: 0011838939501 Trips: 8181140700003

		00

1	L2RETTD	DECLARATION			
RE'	ΓTD	36 M.R.S. §§ 4641-4641N	03/02/2018 11:36 AM		
1. County	2018R-01337				
SAGADA	HOC			Transfer Tax of 748.00	
2. Municipality	/Township			State of Maine Transfer Tax	
BATH			,	sagadahoc county maine 2018—1337	
3. GRANTEE/			BO.	DK/PAGE—REGISTRY USE ONLY	
PURCHASER	3a) Name LAST or BUSINESS, FIF	15.7 A.M			
		HN W.			
	3c) Name, LAST or BUSINESS, FIF				
	- U	ARON M.			
	3e) Mailing Address after purcha 3310 HARBOU	R POINTE PLACE #5			
	3f) City			sgistate snight code	
	FAYETTEVILL			NC 28314	
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINESS, FIF	ELIZABETH A.			
	4c) Name, LAST or BUSINESS, FIR				
	4e) Mailing Address				
	11646 WINDI	NG WOOD DRIVE		i	
	4f) City			4g) State 4h) ZIP Code	
	'INDIANAPOLI	S		IN 46235	
5. PROPERTY	5a) Map Blo	ck Lot Sub-Lot	5b) Type of property—Enter	the cade number that here	
J. PROPERIT	16	45 2	describes the property being	sold. (See instructions)—»	
	1 - 1 - 1		Check any that apply: No tax maps exist	5d) Acreage	
	5c) Physical Location	TOTAL T AND # 40	Multiple parcels		
į	25 SPRING VI	EW LANE #2	Portion of parcel	•	
6.TRANSFERTA	X 6a) Purchase Price (if	the transfer is a gift, enter "0")	ба	170000.00	
		(enter a value only if you entered "0" in	<u> </u>		
	if 6a) was of nominal		6b	.00	
	6c) Exemption claim -	Check the box if either grantor or grante	ee is claiming exemption from	transfer tax and explain.	
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the property is cla	ssified as Farmland. Open Space	te. Tree Growth, or Working Water-	
0d - 2	8-2018	front a substantial financial penalty could be		bdivision, partition or change in use.	
MONTH	DAY YÉAR			CLASSIFIED	
	:UMSTANCES—Were there any hich suggest that the price pa		, .	s) not required to withhold Maine e tax because:	
than its fair mar	ket value? If yes, check the box	and explain:		ed as a Maine resident	
		i		en received from the State Tax Assessor	
			1 Foreclosure sale	or the property is less than \$50,000	
11. OATH	Aware of penalties as se	t forth by 36 M.R.S. § 4641-K, we hereby swe	ear or affirm that we have each	examined this return and to the best of	
	our knowledge and belief	it is true, correct, and complete. Grantee(s) ar	d Grantor(s) or their authorize	d agent(s) are required to sign below:	
	Grantee	Illera Ar Fladding	antor Etil Aver A. H	Date 186/18	
12. PREPARER	Grantee AMA 1 Merryme	eting Midcoast Title, LLC	antor	Date	
Wileli	13 Ples	sant Street	rnone Number	dcoasttitle.com	
	Mailing Address Bruns	wick, ME 04011	Cinan Address	9-8339	
	•	o://www.maine.gov/revenue/propertytax/tr			

PROCESSED ONLINE. DO NOT RE-PROCESS

DLN: 1001840021855

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	03/02/2018
Time Recorded	11:45:00 AM
ransfer Tax Amount	\$0.00
Document Number	2018r-01341

	TTD	TITLE 36, M.R.S.A. SECTIO		111	Time Recorded	11:45:00 A	λM
		TITLE 30, W.N.S.A. SECTIO	NS 994041-404		nsfer Tax Amount	\$0.00	
Sagadaho	oc			D	Ocument Number	2018r-013	41
1. County				_	Book	2018	
BATH						1341	
2. Municipality	y/Township				BOOK/PAGE—REG		
3. GRANTEE/ PURCHASER					Total New	ISTRI OSE ONEI	
	SEELEY JR 3a) Name (LAST)	R JOSEPH (FIRST)		J (MI)	3b) SSN or Fede	ral ID	
	SEELEY 3c) Name (LAST)	JOAN (FIRST)		T (MI)	3d) SSN or Feder	ral ID	
	372 WASHI	INGTON STREET					
	3e) Mailing Address						
	BATH				ME	04530	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	
SELLER	SEELEY JF 4a) Name (LAST)	R JOSEPH (FIRST)		J (MI)	4b) SSN or Feder	ral ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
		NGTON STREET					
	4e) Mailing Address					 	
	BATH				ME ME	04530	
5. PROPERTY	4f) City		EI.	\ T 6	4g) Sta	<u> </u>	ode
J. I NOT ENT	33 5a) Map	Block Lot Su	de	scribes the proper ck any that appl	•		
		NGTON STREET		No tax maps of Multiple parce Portion of par	els 1.00		
6. TRANSFER TA	5c) Physical Location			,	5d) Acreage		
	6a) Purchase	Price (If the transfer is a gift, enter "0")		6a	\$0		00.
	6b) Fair Marke if 6a) was of n	et Value (enter a value only if you ente ominal value)	red "0" in 6a) or	6b	\$144,500		.00
	6c) Exemption	claim – \overline{X} Check the box if either granto	r or grantee is clai	ming exemption	n from transfer tax and	explain.	
Adding sp	ouse to title						
02	NSFER (MM-DD-YYY) 23 2018	8. WARNING TO BUYER-If the profession of the pro	perty is classified a y could be triggere	s Farmland, Ope ed by developm	en Space, Tree Growth, ent, subdivision, partit	or Working Wate tion or change in CLASSI	use.
MONTH 9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were t	here any special circumstances	10. INCOME TA	X WITHHELD-	Buyer(s) not required t		
in the transfer w	hich suggest that the p ket value? If yes, check	price paid was either more or less		_	income tax because:		-
criair its iair iliair	ket value: II yes, check	the box and explain:			qualified as a Maine re has been received from		
					ation for the property i		
				Foreclosu	ire Sale		
11. OATH	our knowledge and	ies as set forth by Title 36 §4641-K, we her d belief, it is true, correct, and complete. Gra	antee(s) and Grant	or(s) or their au	thorized agent(s) are re	equired to sign b	elow:
		H J SEELEY JR Date 03/05/2		JOSEPH J S		Date 03/05/	
12. PREPARER	Grantee	Date 03/05/2		JOAN T SE		Date03/05/	2018
	Name of Preparer	C CARNRIGHT 260 AIRSIDE DRIVE			(866) 789-1814 Ext		
	Mailing Address	ABBOT, PA 15108		-Mail Address -ax Number	ccarnright@mortgage	соппесир.сот	
				un ivuilibei			

DLN: 1001840022131

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry Sagadahoc Date Recorded 03/05/2018

	RE-PROCESS.	DECLA	ARATION		Time Recorded	09:58:00 A	M
RE	<u> TTD</u>	TITLE 36, M.R.S.A. SE	CTIONS §§4641-46	41N Trar	sfer Tax Amount		
Sagadaho	c				ocument Number		
1. County						2018	
BATH							
2. Municipality	Township Township				•	1352	
3. GRANTEE/ PURCHASER					BOOK/PAGE—REG	ISTRY USE ONLY	
PONCHASEN	BILOKONSKY 3a) Name (LAST)	Y MIDCOAST PROP	ERTIES LLC	(MI)	3b) SSN or Feder	ral ID	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	ral ID	
	10235 HOLDE	R WAY					
	3e) Mailing Address		"V don't			–	
	SAN DIEGO				CA	92124	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	BILOKONSKY	Y VASYL		M.			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	al ID	
	BILOKONSKY		EY				
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
	4e) Mailing Address	<u>R WAY</u>					
						7 00101	
	SAN DIEGO 4f) City				CA 4g) Sta	92124 4h) Zip Coo	
5. PROPERTY			5	b) Type of property	y—Enter the code number	r that best	
	26 5a) Map	Block 31		escribes the proper eck any that appl	ty being sold . (See instruc y:	tions)—» 202	
			- Jub-Lot	No tax maps e	t t		
	119 OAK STRI	EET		Multiple parce Portion of par	cel 0.20		
6. TRANSFER TA	5c) Physical Location				5d) Acreage		
	6a) Purchase Price	e (If the transfer is a gift, ente	er "0")	6a	\$0		.00
	6b) Fair Market Va if 6a) was of nomi	alue (enter a value only if you inal value)	u entered "0" in 6a) or	6b	\$217,100		.00
	6c) Exemption clair	m – \overline{X} Check the box if either	grantor or grantee is cla	l Jimina ovomntio	n from transfor tay and	Louplain	
Individual		ge in beneficial owner		iiiiiig exemptio	ir ironi transier tax and	explain.	
	02 2018	8. WARNING TO BUYER-If t front a substantial financial					
MONTH	02 2018 DAY YEAR		. , , , , ,	, ,	, , , , , ,	CLASSIF	
9. SPECIAL CIRC	UMSTANCES—Were there	any special circumstances	10. INCOME T	AX WITHHELD-	Buyer(s) not required t	o withhold Maine	
	nich suggest that the price et value? If yes, check the	e paid was either more or less box and explain:			income tax because: qualified as a Maine re	esident	
	•	·			has been received fron		essor
					ation for the property i	s less than \$50,00	0
11. OATH	Aware of penaltics a	s set forth by Title 36 §4641-K,	we hereby sweet or see	Foreclosu		turn and to the 1	st of
TI. OAIII	our knowledge and be	lief, it is true, correct, and compl	lete. Grantee(s) and Gran	rm that we have ntor(s) or their au	each examined this rei thorized agent(s) are re	turn and to the be equired to sign be	est of low:
	Grantee VASYL M.	BILOKONSKY Date 0	3/05/2018 Grantor		SKY MIDCOAST	PROPERTUES	20118C
			03/05/2018 Grantor			Date03/05/2	2018
12. PREPARER		OHN T. VOORHEES, JR.		Phone Number	-		
	maning madress	3 PLEASANT STREET		E-Mail Address	ewhite@midcoasttitle	:.com	_
	B	BRUNSWICK, ME 04011		Fax Number			

Merits: 0011838938908 Trips: 8181140700017



12RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

36 M.R.S. §§ 4641-4641N

	110		30 M.n.3. 33 4041-4041	<u> \</u>	1618	2:51 P.M
1. County						-01409
SAGADA	HOC				•	fer Tax of
2. Municipality	//Township					ne Transfer Tax
BATH					2018	
3. GRANTEE/						REGISTRY USE ONLY
PURCHASER	3a) Name LAST or BU: FLANAGAI	SINESS, FIRST, MI N , BARTLE	TT L.	•	 ·	
	30 Name, LAST or 8US MILLER,	SINESS, FIRST, MI DONALD J	•		_' -	
	:300A OLI	ter purchase of this prop PORTLAN	D ROAD	·	' 	
	BRUNSWI	-				State 3h) ZIP Code 1E 04011
4. GRANTOR/ SELLER	4a) Name, LAST or BUS WASHINGT 4c) Name, LAST or BUS	ON PROPE	RTY MANAGEME	NT		
	ACLIVABLE DAST OF BOS			-	i	
y.	4e) Mailing Address PO BOX 6	534	·			
	4f)Gty BRUNSWIC	K			<u></u>	4g) State 4h) ZIP Code ME 04011
5. PROPERTY	5a) Map	Block	Lot Sub-Lot	5b) Type of proper	rty—Enter the code no erty being sold. (See i	umber that best
	28		279	Check any that app	oly:	1 1 1 1 1 1
	5c) Physical Location			Multiple par		
	41 LINCOI	LN STREET	····	Portion of pa	ırcel	.21
6.TRANSFERT	X 6a) Purchase	Price (If the transfe	r îs a gift, enter "0")	6а	1	00.0
		et Value (enter a val nominal value)	lue only if you entered "0" in	n 6a) or 6b		325000.00
	6c) Exemption	claim – ✓ Checkti	ne box if either grantor or gran	tee is claiming exemption	on from transfer ta	x and explain.
title 36 se	_		tnership and its part			
· · · · · · · · · · · · · · · · · · ·	NSFER (MM-DD-YYY		TO BUYER-If the property is cl	······································		owth, or Working Water-
3/6	18	front a subst	antial financial penalty could b	e triggered by develop	nent, subdivision,	partition or change in use.
9. SPECIAL CIRC	UMSTANCES—Were	there any special circu	ımstances (* 10.1N	COME TAX WITHHELD	-Rungarie) not roqu	
in the transfer w	hich suggest that the	price paid was either	more or less '. '	,	income tax becau	156:
filan it2 ian inat	ket value? If yes, check	ctile box and explain:			as qualified as a Ma	ine resident I from the State Tax Assessor
			i			erty is less than \$50,000
				Foreclos	• •	arcy to 1000 triain 400,000
11. OATH	Aware of penalt	ies as set forth by 36	M.R.S. 5 4641-K, we hereby sw	rear or aftirm that we ha	we each examined	this return and to the best of
	Grantee Grantee	d belief, it is true, corr	ect, and complete. Grantee(s) a	<i>y</i>	thorized agentis	2/11/5
	Grantee Grantee		' /	rantor 4	3.00	Date <u>\$/00/10</u>
12. PREPARER	Name of Preparer	Staddard L. Smith, PA	Date C	Grantor	207-721-0622	Date
	•	49 Pleasant St.		Phone Number	sis@mainestatela	aw.com
	Mailing Address	Brunswick, ME (04011	Email Address Fax Number	207-373-9030	
Rev. 12/1	5		ne.gov/revenue/propertytax/			

Merits: 0011838939407 Trips: 8181140700015



KE	IID		36 M.R.S. §§ 4641-4641N			
1. County					03/86/2018 0	2.00 014
SAGADAI	HOC			ļ	2018R-0	
2. Municipality/	Township	<u> </u>			Transfer Tax of	
BATH	-			<u>-</u>	State of Maine Tra SAGADAHOC COU	
3. GRANTEE/					2018-	
PURCHASER	5 111 · 1457 · 511					/
	BATH HOU	USING DEV	ELOPMENT CORE	PORATION	_}	
	3c) Name, LAST or BUS				.i	
					† !	
	3e) Mailing Address at 80 CONGF	fter purchase of this prop RESS AVEN	verty			
	3f) City				3g) State	_3h) ZIP Code
	BATH	- Wei strang			ME ME	04530
4. GRANTOR/ SELLER	4a) Name, LAST or BU	SINESS, FIRST, MI Nø BARTLE	ψΨŢ.		 }	
	4c) Name, LAST or BU	 -				
		DONALD J	•		•	
	4e) Mailing Address				•	
	300A OLI	PORTLAN	D ROAD			
	4f) City				4g) State	4h) ZiP Code
	BRUNSWIC	CK			ME	04011
5. PROPERTY	5a) Map	Block	Lot Sub-Lot	5b) Type of property	-Enter the code number tha	tbest
	28		279	describes the proper	ty being sold. (See instruction	5)>
	5c) Physical Location	·		Check any that apply No tax maps e		
, ,	•	LN STREET	· · · · · · · · · · · · · · · · · · ·	Multiple parce		21
<u>'</u>				Portion of pan	cel '	• • • •
6.TRANSFERTA	K 6a) Purchase	Price (If the transfe	r is a gift, enter "0")	ба ј	32	25000 .00 [
			lue only if you entered "0" in	6a) or	: :	
	if 6a) was of r	nominal value)		6b		.00
	6c) Exemption	claim - Check t	he box if either grantor or grante	e is claiming exemption	from transfer tax and ex	plain.
						}
7, DATE OF TRAI	NSFER (MM-DD-YYY		TO BUYER-If the property is cla	ssified as Farmland, Ope	en Space, Tree Growth, or	Working Water-
03/06	2018	front a subst	tantial financial penalty could be	triggered by developm	ent, subdivision, partition	or change in use. CLASSIFIED
MONTH 9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were	there any special circu	umstances 10. INC	OMETAX WITHHELD-	Buyer(s) not required to w	
in the transfer wh	nich suggest that the	price paid was either k the box and explain:	more or less	أ يسم	income tax because:	
triate its fair fildik	et value: II yes, check	rme pox aira exbiaili			qualified as a Maine residnas been received from the	
			1		ation for the property is le	
··· ·	· · · · · · · · · · · · · · · ·		<u> </u>	Foreclosu	re sale	
11. OATH	Aware of penalt	ties as set forth by 86	i M.R.S. § 4641-K, we hereby swe rect, and complete. Graptee(s) an	ar or affirm that we hav	e each examined this returns	um and to the best of
	Grantee Grantee	LIKE	2/20/26	antor	montes after my are redu	Date 2/28/2018
	Grantee	V	• /	antor		Date
12. PREPARER	Name of Preparer	Staddard L. Smith, PA			207-721-0622	
**	Mailing Address	49 Pleasant St.			sis@mainestatelaw.com	
		Brunswick, ME		rax runniber .	207-373-9030	
Rev. 12/1:	5	http://www.mai	ine.gov/revenue/propertytax/tr	ansfertax/transfertax.i	ntm	

DO NOT RE-PROCESS.

_	_	_		-	-	 _
_						
D		7	~	п		

DLN: 1001840022385

Sagadahoc							
03/06/2018							
03:03:00 PM							
\$836.00							
2018r-01416							
2018							
1416							
BOOK/PAGE—REGISTRY USE ONLY							

RE	TTD	TITLE 3	6, M.R.S.A. SEC	TIONS 68		641N		Tim	e Recorded	03:03	:00 P	<u>M_</u> _
							Tra	nsfer T	ax Amount	\$836.	.00	
Sagadaho	oc						Γ	Ocum	ent Number	20181	<u>-01</u> 41	.6
1. County						\dashv			Book	2018		
BATH					_					1416		
2. Municipality	//Township			<u> </u>				PO(_		ONILY	
3. GRANTEE/ PURCHASER						L		ьо	OK/PAGE—REC	JISTRY USE	ONLY	
PORCHASER	SOLOMON 3a) Name (LAST)		TIMOTHY (FIRST)	•			J. (Mi)	3b) SSN or Fede	eral ID		
	2-) Al (I ACT)											
	3c) Name (LAST)	DOTREET	(FIRST)	·			(MI)		3d) SSN or Fede	eral ID		
	3 GODDAR 3e) Mailing Address	DSIKEEI										
									7 7			
	BATH 3f) City] ME		530	
4. GRANTOR/									3g) State	3h) 2	ip Code	_
SELLER	BAUM		MARTHA				L.					
	4a) Name (LAST)		(FIRST)				(MI)		4b) SSN or Fede	ral ID		
	4 a) b) a a (1 ACT)		(ELD.GE)									
	4c) Name (LAST)	ALL CEDERA	(FIRST)				(MI) 		4d) SSN or Fede	ral ID		
		ALL STREET	·									
	4e) Mailing Address						-		-			
	BATH					_			_ ME	04	530	
C DDODEDTY	4f) City								4g) St		h) Zip Coc	le
5. PROPERTY	38		095	ŀ		describes	the proper	rty being	the code numbe sold. (See instruc		202	
	5a) Map	Block	Lot	Sub-Lot	(_ `	that app	•		L		
	3 GODDAR	D STREET				_	tax maps : tiple parc		0.00]	
	5c) Physical Location				[Port	ion of par	cel	5d) Acreage		J	
6. TRANSFER TA	X ба) Purchase I	Price (If the transf	er is a gift, enter	·"0")			6а	\$190	0,000			.00
	6b) Fair Marke	t Value (enter a va	alue only if you	entered "0	"in 6a) c	r			<u></u>			
	if 6a) was of n				,		6b					.00
	6c) Exemption	claim – Check	the box if either g	rantor or gr	antee is c	laiming	exemptio	n from t	ransfer tax and	d explain.		
						-	,					
7. DATE OF TRA	NSFER (MM-DD-YYYY	7) Q WADNINI	G TO BUYER-If the	o proportui	s classif o	al a a Taum	سام المسام	6	. T C I		144	
03 MONTH	02 2018 DAY YEAR		stantial financial pe	enalty could	d be trigg	ered by	developm	en Spac ient, suk	e, free Growth odivision, parti	tion or cha	ng Water ange in u CLASSIF	ise.
9. SPECIAL CIRC	UMSTANCES—Were ti	nere any special circ	umstances	10.	INCOME	TAX WI	THHELD-	Buver(s) not required			
in the transfer w	hich suggest that the p	orice paid was eithe	r more or less					income	tax because:		a manic	
uiaii its iaii iliali	ket value? If yes, check	tne box and explair	" Ц			X			ed as a Maine r			
						Н			n received fror r the property			
							Foreclosu		a property	15 1055 11101	1 450,000	•
11. OATH	Aware of penalti	es as set forth by Ti	tle 36 §4641-K, w	e hereby sw	vear or aff	firm that	we have	each ex	amined this re	turn and t	o the be	st of
	our knowledge and Grantee MARTH	i pellet, it is true, cor ΓΔ Γ ΒΔΤΤΜ										
		LI D. DAUM	02	/06/2018 /06/2018			NIUI	J. SOL	LOMON		03/06/2 03/06/2	
12. PREPARER	Grantee Name of Preparer .	PHENIX TITLE		, 30, 2010	Grantor		N	(207)	774 0424	Date	U3/U0/2	010
	,	119 MIDDLE ST					Number_		774-0434 lin@phenixtitle	e com		_
	Mailing Address .	PORTLAND, ME				E-Mail	Address	igrond	шеврисшкий			

PROCESSED ONLINE. DO NOT RE-PROCESS.

Mailing Address

PORTLAND, ME 04101

DLN: 1001840022392

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	03/06/2018
Time Recorded	03:07:00 PM
ransfer Tax Amount	\$572.00
Document Number	2018r-01417
Book	2018
D	1/1/7

RE	TTD	TITLE 36, M.	R.S.A. SEC	TIONS §§464	1-4641N			_	03:07:00 P	M
Sagadaho	200					Tran	ster Tax	Amount _	\$572.00	
1. County	JC					D	ocument	Number _	2018r-014	<u> 17 </u>
BATH								Book _	2018	
2. Municipality	v/Township							Page	1417	
3. GRANTEE/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***			BOOK/I	PAGE—REGIS	TRY USE ONLY	
PURCHASER	GEHMAN 3a) Name (LAST) MROZINSKI	(FIRS	RDAN		•	D. (MI)		SSN or Federal	ID	
	3c) Name (LAST)	IVIZ (FIRST				W. (MI)	<u> </u>	SSN or Federal	ID	
	12 WEEKS STR 3e) Mailing Address	EET					,			
	BATH							ME	04530	
	3f) City							3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	FERLAND 4a) Name (LAST)	MI (FIRST	CHAEL			B.	4b)	SSN or Federal	ID	
	WEICHSEL	FR	ANCES			L.				
	4c) Name (LAST)	(FIRST				(MI)	4d)	SSN or Federal	ID	
	14522 OVERVII	EW DRIVE								
	4e) Mailing Address									
	DALLAS 4f) City			<u> </u>				TX 4g) State	75254 4h) Zip Co	ode
5. PROPERTY	33		46					code number th I. (See instruction		$\overline{}$
			Lot	Sub-Lot	J Check any	that apply	<i>i</i> :	i. (See iristructio	ons)—» 202	
	12 WEEKS STR	FFT				tax maps e Itiple parce		0.00		
	5c) Physical Location	DD I				ion of parc	_{:el} L	d) Acreage		
6. TRANSFER TA	AX 6a) Purchase Price ((If the transfer is:	a gift enter	"O")		6a	\$130,0			.00
	6b) Fair Market Valu		-	-	a) or	ا من	\$150,0] .00
	if 6a) was of nomin		oiny ii you i	entered o mo	a) UI	6b				.00
	6c) Exemption claim	- Check the b	ox if either a	antor or grantee	is claiming	exemption	from tran	sfer tay and o	vnlain	_
	,		g.	antor or grantee	is comming	exemption	i irom cian	sici tax ana c	Apidiri.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY)	8. WARNING TO	RUYER_If the	nronerty is class	ified as Farr	niand One	n Space Ti	roo Growth o	r Marking Wate	
02	28 2018	front a substanti	al financial pe	enalty could be t	riggered by	developm	ent, subdiv	rision, partitic	on or change in	use.
MONTH	DAY YEAR								CLASSI	
in the transfer w	CUMSTANCES—Were there a which suggest that the price part that the price part the book the bo	aid was either mor		10. INCO	ME TAX WI	i Seller has A waiver h	ncome tax qualified a nas been re ation for the	because: s a Maine res ceived from t	withhold Maine ident the State Tax As: less than \$50,00	sessor
11. OATH	Aware of penalties as	set forth by Title 3	6 §4641-K, w	e hereby swear o	or affirm tha	t we have e	each exami	ned this retu	rn and to the b	est of
	our knowledge and belie Grantee MICHAEL B			10/10010		or their aut RDAN D			02/06/	
		. WEICHSEL		06/2010		LI W. M			Date 03/06/	
12. PREPARER		ENIX TITLE SERV	- Date	Gia		Number_	(207) 774		Date	
		MIDDLE STREE						Ophenixtitle.c	om	

E-Mail Address <u>lgrondin@phenixtitle.com</u>

Fax Number

DLN: 1001840022457

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	03/09/2018
Time Recorded	09:49:00 AM
Transfer Tax Amount	\$638.00
Document Number	
	2018
	1461

	DE DDOGEGG	KEVE ESTATE IS	MINDLEN INV	`	Date R	ecoraea <u>03</u>	<u>/09/2018</u>	
-	RE-PROCESS. ITD	DECLAR.		4111	Time R	ecorded 09	:49: <u>00 A</u>	<u>M</u>
	טוו	TITLE 36, M.R.S.A. SECT	IONS 994041-464	Tran	sfer Tax	Amount <u>\$6</u>	38.00	
Sagadaho	c			D	ocument	Number <u>20</u>	18r-0146	1
1. County						Book 20	18	
BATH	100					Page 14		
2. Municipality	/Township				BOOK/F	PAGE—REGISTRY		
3. GRANTEE/ PURCHASER	BAUM 3a) Name (LAST)	MARTHA		L (MI)	3b)	SSN or Federal ID		
	3c) Name (LAST)	(FIRST)		(MI)		SSN or Federal ID		
	3 GODDARD ST	REET						
	3e) Mailing Address BATH					ME	04530	
	3f) City					3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	FELDMAN 4a) Name (LAST)	DANIEL (FIRST)		C (MI)	4b)	SSN or Federal ID		
	CELLIER 4c) Name (LAST)	HILDEGAR (FIRST)	D	B (MI)	4d)	SSN or Federal ID		
	2732 GANNETT	DRIVE						
	4e) Mailing Address							
	COSTA MESA					CA	92626 4h) Zip Cod	40
5. PROPERTY	4f) City			5b) Type of propert	y—Enter the	4g) State code number that	best	
	38 5a) Map Blo	<u>097</u>		lescribes the prope eck any that app		I. (See instructions)	⊢» <u>202</u>	
	24 MARSHALL S	STREET		No tax maps Multiple parc		0.14		
	5c) Physical Location			Portion of pa	cel 5	d) Acreage		
6. TRANSFER TA	X 6a) Purchase Price (I	the transfer is a gift, enter "	0")	ба	\$145,0	000		.00
		e (enter a value only if you e	ntered "0" in 6a) or					.00
	if 6a) was of nomina			6b		<u> </u>		.00
	6c) Exemption claim –	Check the box if either gra	antor or grantee is ci	aiming exemptic	n from tran	sfer tax and exp	iain.	
	NSFER (MM-DD-YYYY) 02 2018	8. WARNING TO BUYER-If the front a substantial financial pe						
MONTH	DAY YEAR						CLASSIF	FIED
in the transfer w	UMSTANCES—Were there an hich suggest that the price pa ket value? If yes, check the box	id was either more or less	10. INCOME	FAX WITHHELD-	income tax	•		
				X A waiver	has been re ation for th	eceived from the	State Tax Ass	
11. OATH		et forth by Title 36 §4641-K, we						
	our knowledge and belief, Grantee DANIEL C FI	it is true, correct, and complete ELDMAN Date _03/		ntor(s) or their au MARTHA			red to sign be ate <u>03/12/2</u>	
	Grantee HILDEGARD		12/2018 Grantor				oate 03/12/2	
12. PREPARER		THER SHAFFER		Phone Number	(207) 775	5-0900 Ext		
	Mailing Address 707	SABLE OAKS DRIVE, SUITE	350	E-Mail Address	heathers(@hdtitle.com		

SOUTH PORTLAND, ME 04106 _____ Fax Number

DLN: 1001840022556

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	03/12/2018
Time Recorded	08:42:00 AM
Transfer Tax Amount	\$1,333.20
Document Number	2018r-01498
Book	2018
Page	1498
υ.	

DO NOT	RE-PROCESS.	NEAL ESTATE		IAA	1	Jate Re	ecorded <u>U.</u>	3/12/2018	-
	TTD	TITLE 36, M.R.S.A. SI	ARATION ECTIONS 884641	1-4641N	Т	ime Re	corded 0	8:42:00 A	<u>M</u>
1/1	110	THEE 30, W.N.S.A. 31	LC 110113 33404 1	1-404 I N	Transfe	r Tax A	Amount _\$	1,333.20	
Sagadaho	ОС				Docu	ıment N	Number 20	018r-0149	8
1. County							Book 20	018	
BATH, B							Page 14		
2. Municipality	/Township					BOOK/PA	AGE—REGISTE		
3. GRANTEE/ PURCHASER	KIRK FAMILY H 3a) Name (LAST) 3c) Name (LAST)	OLDINGS L.C. (FIRST)			(MI)		SN or Federal ID SN or Federal ID		
	801B MAIN AVE	NUE							
	3e) Mailing Address CLEAR LAKE 3f) City				112/10-1		IA 3g) State	50428 3h) Zip Code	
4. GRANTOR/ SELLER	WILGUS 4a) Name (LAST)	WALTEF	2		Q. (MI)	4b) S	SN or Federal ID		
	SCHEIBNER 4c) Name (LAST)	STEPHEI (FIRST)	N		P.	4d) S	SN or Federal ID		
	21 MAIN ROAD				, ,	10,5	on or reactarile		
	4e) Mailing Address								
	PHIPPSBURG						ME	04562	
	4f) City						4g) State	4h) Zip Coo	de
5. PROPERTY	38 Sa) Map Block	22 Lot	Sub-Lot	describes Check any		eing sold .	ode number that (See instructions		
	226 WASHINGTO	N STREET		Mult	iple parcels on of parcel		0.27		
6 TDANCEED TA	5c) Physical Location				on or parcer	5d)	Acreage		
6. TRANSFER TA	6a) Purchase Price (If	the transfer is a gift, en	ter "0")		6a \$1	302,75	50		.00
	6b) Fair Market Value if 6a) was of nominal v	(enter a value only if yo value)	ou entered "0" in 6	ia) or	6b				.00
	6c) Exemption claim –	Check the box if eithe	er grantor or grantee	e is claiming e	exemption fro	m trans	fer tax and exp	olain.	
7. DATE OF TRA		B. WARNING TO BUYER-If ront a substantial financia							use.
in the transfer w	CUMSTANCES—Were there any which suggest that the price paid ket value? If yes, check the box a	was either more or less	10. INCO	X	inco Seller has qu A waiver has	ome tax la alified as been rec n for the	required to wo pecause: a Maine resid seived from the property is les	ent e State Tax Ass	sessor
11. OATH	Aware of penalties as set our knowledge and belief, it GranteeWALTER Q. V	is true, correct, and comp VILGUS Date	olete. Grantee(s) and	d Grantor(s) o	r their autho	rized age		ired to sign be	elow:
	Grantee STEPHEN P. S	CHEIBNER Date	03/12/2018 Gra	intor				Date 03/12/	2018
12. PREPARER	40 PM	DARD L. SMITH			Number <u>(2</u>				
	Mailing Address 49 PL	EASANT STREET		E-Mail	Address <u>Li</u>	sa@maii	nestatelaw.con	1	

BRUNSWICK, ME 04011 Fax Number

Merits: 0011838939812 Trips: 8181140700025



RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

TITLE 36, M.R.S.A. SECTIONS 4641-4641N

PLEASE TYPE OR PRINT CLEARLY DO NOT USE BED INKL

3110118	1:41 7.M
2018 R-0	7589
	Tax of
State of Maine	Transfer-Tax
	1
2018 — BOOK/PAGE—REG	SISTRY USE ONLY

1. COUNTY	DO NOT USE RED II	NKI	- 4	UISR-C	
<u>SAGADA</u>		MIG	Sta	Transfer T to of Maine T	
2. MUNICIPALI BATH.	TY/TOWNSHIP		\	2018— BOOK/PAGE—REGIS	
3. GRANTEE/	3a) Name (LAST, FIRST, MI)				
PURCHASER	MARY F. BARRETT LIVING TRUS	ηı			
1	3c) Name (LAST FIRST MAI)	<u> </u>			
	September 1673 1 1774				
	3e) Mailing Address 1483, WASHINGTON, STREET,		1-1-1-1-1-1-1	<u> </u>	-1
	3f) City BATH	.1 1 1	1 1 1 1	3g) State ME	3h) Zip Code <u>,045,30</u> ,
4. GRANTOR/	4a) Name (LAST, FIRST, MI)				
SELLER	BARRETT, MARY D.				
	4c) Name (LAST, FIRST, MI)				
	A/K/A MARY F. DUPONT BARRETT	Γ	* 		
	4e) Mailing Address				
ļ	1483 WASHINGTON STREET	1T	1 _ 1 _ 1 _ 1 _ 1		_ r
	4f) City			4g) State	4h) Zip Code
	BATH	1		, MĘ.	,045,30
5. PROPERTY	5a) Map Block Lot Sub-Lot	(Check any that apply:		perty—Enter the code
	13 - 57 -			number that bes being sold. (See	t describes the property
	5c) Physical Location		No tax maps ex	dist	uistructions)
	1483 WASHINGTON STREET		Multiple parcel	5 5d) Acreage:	
	1403 WASHINGTON SIREEL		Portion of parce	el <u></u>	
6.TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter "0")		6a \$.,0.00
	6b) Fair Market Value (enter a value only if you entered "0" in 6 if 6a) was of nominal value)	sa) or	6b \$, 30	<u>52800.00</u>
	6c) Exemption claim – Check the box if either grantor or grantee	e is claimi	ng exemption from t	ransfer tax and expl	ain.
	deed into trust pursuant to M.R.S.A. 36 Section	4641-C	(!5) (A)		
	7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING	GTO BUY	ER-If the property is	classified as Farmlar	nd, Open Space or
	09-18-2017 Tree Growth	h, a Subst	antial financial penal	ty could be triggere	d by development,
	MONTH DAY YEAR	, partition	or change in use.	CLASSIFIED	
9. SPECIAL CIRC	UMSTANCES—Were there any special circumstances in the transfer at the price paid was either more or less than its fair market value?	10.1	NCOME TAX WITHHE	LD- Buyer(s) not r	equired to withhold
which suggest th	at the price paid was either more or less than its fair market value?			Maine incom	
If yes, check the	•	1	Seller has qua	alified as a Maine res	ident
see box 6c a	ibove		A waiver has b	been received from t	the State Tax Assessor
			Consideration	n for the property is	less than \$50,000
11. OATH	Aware of penalties as set forth by Title 36 54641-K, we hereby swe	ear or affi	m that we have each	examined this retu	rn and to the best of
	our knowledge annibelief it is the correct, and complete. Grantee(s)	and Gran	tor(d) of their author	i zetta gentis) are rec	juited to sign below: ,
	Grantee Date 918	Grantor .	Thilly	メナイグ	Date 91814
	AAONT	Grantor ,		Agent	Date
12. PREPARER	Name of Preparer Hopkinson & Abbondanza		Phono Number 2	07-772-5845	
	6 City Contan Cuita 400			hopkinson@h	ahlaw.com
	Mailing Address Portland, MAine 04101		E-Mail Address 그		
	rorerand, marine agint				

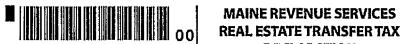
	00 L2RETID*	MAINE REVENUE S REAL ESTATE TRAN DECLARATION 36 M.R.S. 95 4641-	ISFER TAX ON	03/14/2018 03:50 PM 2018R-01615
1. County SAGADA	HOC			Transfer Tax of 638,00 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE
2. Municipality	Township		-1	2018-1615
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRE DONALCO, INC. 3c) Name LAST or BUSINESS, FIRE 3c) Malling Address after purchas 141 MAIN STE 3f) City SOUTH PORTLA	nt. An		3g) State - 3h) 23P Code - 1
4. GRANTOR/ SELLER	40) Name LAST OF BUSINESS, FR. LEBAND, PAUI	T,MI	·	1017. 2 1144 11171 /
	26 QUEENS CO	DURT		4g) Store 4h) ZIP Code CA 94558
5. PROPERTY	5a) Map Bloc 20 5c) Physical Location 25 DRUMMOND 1	332		s exist 56) Acreage rcels 1
6.TRANSFERTA	X 6a) Purchase Price (If	he transier is a gift, enter "0")	68	145,000.00
	6b) Fair Market Value if 6a) Was of nominal	(enter a value only if you entere value)	kd*'0" in 6a) or 6b	.00
	6c) Exemption daim - [Check the box if either grantor	or grantee is dainting exempti	on from transfer tax and explain.
7. DATE OF TRA	NSFER (MM-DD-YYYY) 8	. WARNING TO BUYER-If the proper cont a substantial financial penalty of	rty is classified as Farmland, O could be triggered by develop	pen Space, Tree Growth, or Working Water- ment, subdivision, partition or change in use. () CLASSIFIED
in the transfer w	UMSTANCES—Were there any hich suggest that the price pair set value? If yes, check the box a	was either more or less	Seller h	Buyer(s) not required to withhold Maine income tax because: as qualified as a Maine resident rhas been received from the State Tax Assessor eration for the property is less than \$50,000 sure sale
11. OATH	Aware of penalties as Ct our knowledge and belief, it Grantee	forth by 36 M.R.S. § 4641-K, we her is true, correct, and complete. Gran Date 3/8/	eby swear or affirm that we b	ave each examined this return and to the best of uthorized agent(s) are required to sign below: Date 3/6/20/8
12. PREPARER	Name of Preparer Mailing Address FIRST CHO 80 MAIN	Date Date STREET AM, ME 04038	Phone Number Email Address Fax Number	Date

Fax Number

http://www.maine.gov/revenue/propertytax/transfertax/transfertax.htm

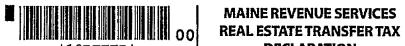
Rev. 12/15

Merits: 0011838940923 Trips: 8181140700047



	MA IAM MARAMET MARAMETA .2RETTD*			DE	CLAR/	ATION		-									
	ΓTD		TITLE:	36, M.R.S.			1641-46	541N	ı	دسرے	.1/	40	.	_	r-#	6 =	
1. County				<u> </u>					_	3		118		2	:58	57-	M
SAGADAI	HOC									ć	K			.01		7.3	/
2. Municipality/	Township								1		Cini			er Ta			<u>-</u>
BATH				, 2.00,										_			•
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSI TRADEMAR	NESS, FIRS	T,MI	ਹਿੰਗੋ ਦੇ ਦਿ ੱ ਦ ਹ	יד פ	VC		Bronges Ser			 			-REGIST			
	3c) Name, LAST or BUSI			14×44 44 44 44	J	.40				************	<u>ا</u> 	Ĺ					
		.,										1					
	3el Mailing Address. 68 BERRY	s Mi	LLS	ROAL)		· · · · · · · · · · · · · · · · · · ·					_					
	WEST BAT	H							· · · · · · · · · · · · · · · · · · ·	·····			M	Ë	04	530	
4. GRANTOR/	4a) Name, LAST or BUS											r					
SELLER	CITY OF										_	L					
	4CINAME LASI GEBUSI	NESS, PIRS	Z Jan William								7	ſ					
	4e) Mailing Address			***************************************				o o Periodo (·		لببر	٠,					
	55 FRONT	STI	REET		37.5					******					ì		
	4f) City		سيومة ماراتيما بي	and the same of th								-		g) State	, ,,,,,,	h) Zip Ço	
	BATH				والمشود بالمسوس	**************************************							[]	ME	04	4530)
5. PROPERTY	5a) Map Sc) Physical Location	Bloc		Lot Dacl	66	Sub-Lot	CI	descri	iibes th any th No tax Multip	proper e prope nat app maps ole pare	erty be oly: exist cels	ing solo	code nu I. (See in d) Acrea	imber the istruction	at best	*****	
6.TRANSFERTA	Y	*						ΪÅ Ι.			7	L			7:1		
	6a) Purchase (6b) Fair Marke	et Value	(enter a	_			"in 6a) c	ĢΓ		6a		······································			40	001	00.
	if 6a) was of n 6c) Exemption			k the box if	either ara	ntoraras	antee îs c	·laimi	ina ex	6b empti	<u></u>	m fran	sfer ta			000	00. (
Release of	matured tax lie			······································	turier gro				119 0		~~~~	1			*********		
	NSFER (MM-DD-YYY)	Y) 1	B. WARNI	ING TO BUY Ibstantial fin											n <u>or c</u> h		use.
	UMSTANCES—Were thich suggest that the					10.	INCOME	TAX	WITH	HELD			ot requ k becau		withho	ild Main	e
	ket value? If yes, check					·			₹] s	eller ha				ine resi	ident		
								Į						l from ti erty is l		•	
								[_	orecio:			ie biob	erty is i	C33 (110	טימכב ווו	JŲ
11. OATH	Aware of penalt our knowledge and	ies as set d belief, i	forth by t is true, c	correct, and	complete	. Grantee(s) and Gn	antor	that v	ve have	eeacl	h exam	ined the	are req	uired t	to sign b	elow:
	Grantee				ate		Granto: Granto			<u>u</u>	/	0 - 1	SW			<u> 3.15.</u>	≥
12. PREPARER	Name of Preparer	David A. I	King, Esq.		atc		atatif0		one N	lumbe	, 207-	442-797	1		Date .		
_	Mailing Address	108 Fro	nt Street,	Bath, ME 0	4530					ddress	Tow			ing@cc	meast	.net	
									x Nun			7-442-7	971				I

Merits: 0011838941222 Trips: 8181140700045



1	2RETTD	DECLARATION			
RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§4641-	-4641N	03/16/2	018 03:02 PM
1. County				2018	R-01698
SAGADA	HOC				ax of 1,056.00 ine Transfer Tax
2. Municipality	/Township			<u>^</u>	C COUNTY HAINE
BATH				(2018	3- 1698)
3. GRANTEE/				BOOK/RAGE—REG	ISTRY USE ONLY
PURCHASER	3a) Name LAST or BUSINESS, FIRS	T.MI			
	RENAUD, LAW		,	J L	
	RENAUD, MAR	IA L.	<u> </u>	l [
	3e) Mailing Address 6 FIRST ROAL)		<u> </u>	
	3f) City			<i>স্মতন্ত্র</i>] [ő <u>4</u> 079
·	HARPSWELL			ME	04079
4. Grantor/ Seller	4a) Name, LAST of BUSINESS, FIR TRADEMARK PI	T,M ROPERTIES CORP.		7 T	
	4c) Name, LAST or BUSINESS, FIRS		, , , , , , , , , , , , , , , , , , , ,	.↓	
	-		· · · · · · · · · · · · · · · · · · ·		
	4e) Mailing Address	et ra mozn			
	68 BERRYS M	TTT2 KOND			l
	WEST BATH		**************************************	49) St ME	A 1 Language and 1 Language and 1
	WHOI DIIII				
5: PROPERTY	5a) Map Bloc	k Lot Sub-Lot		ty—Enter the code numbe erty being sold. (See Instruc	
	31		Check any that app	•	him the manuscript of the second
ī	5c) Physical Location 14 STATE ROA	<u> </u>	Multiple par		
	14 STATE ROA	U	Portion of pa	rcel	
6. TRANSFER TA	X 6a) Purchase Price (If	the transfer is a gift, enter "0")	6a		240000.00
		(enter a value only if you entered "0" in 6a			00
	if 6a) was of nominal		6b		.00.
	6c) Exemption claim	Check the box if either grantor or grantee	is claiming exemption	on from transfer tax and	explain.
		 WARNING TO BUYER-If the property is classifront a substantial financial penalty could be tri 			
MONTH	DAY YEAR				CLASSIFIED
SPECIAL CIRC in the transfer w	UMSTANCES—Were there any thich suggest that the price pai	special circumstances 10. INCOM	ME TAX WITHHELD	 Buyer(s) not required to income tax because: 	to withhold Maine
	ket value? If yes, check the box		train.	as qualified as a Maine r	
			7777	r has been received fror gration for the property	n the State Tax Assessor
			4-femple	sure Sale	
11. OATH	Aware of penalties as set	forth by Title 36 §4641-K, we hereby swear or	r affirm that we have	e each examined this re	turn and to the best of
	Grantee Grantee	the true, sorrect, and complete. Grantee(s) and Qate 3-/6-/8 Gran	# 111	utnorized agent(s) are r	equired to sign below:
	Grante	Parte 3 10 18 Gran			Date
12. PREPARER	Name of Preparer	ting, Esq.	Phone Number		
	Mailing Address 108 Fro	nt Street, Bath, ME 04530	E-Mail Address)comcast.net
			Fax Number	207-442-7910	

Merits: 0011838935305 Trips: 8181140690011

	00
*10000004	

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	IMINIMINIMINIMINIMI 12retto*	111 00	DECLARAT		^		
	TTD		36 M.R.S, §§ 464				03/19/2018 11:33 AM
1. County		<u></u>					2018R-01703
SAGADA	HOC					5	Transfer Tax of 264,00 State of Maine Transfer Tax
2. Menicipality	//Township			 -			AGADAHOC COUNTY MAINE
BATH				-			2018-1703)
3. GRANTEE/ PURCHASER	3a' Name LAST or EUST ATIENZA		n ERCIAL REALT:	Y, LLC			AGE—REGISTRY USE ONLY
	3c) Name LAST or EUS!	VESSLFIRST. A	4			1	
	30 Maring Address after 11 PAGE	STREE	The sproperty.			, i '	
	BATH						ME 04530
4. GRANTOR/ SELLER	40' Name, LAST or EUSI CICERON, 4c' Name, LAST or EUSI	STEV	EN J.				
	4e) Mailing Address					lí	
			QUET CLUB RO	OAD -		 	4g15tate 4+17IPCode CA 92262
	5a' Map			·	· •	·	· '
5. PROPERTY	20' Sci Physical Location 2-4 DENNY	ROAI	61	ı	describes the properties any that app No tax maps Multiple pard Portion of par	rty being sold ly: els	code number that best (See instructions)— Acreage
G.TRANSFERTA	AX Gā) Purchase F	rice (If the	transfer is a gift, enter "0")		6a		60000.00
		t Value (en	ter a value only if you ente				.00.
	6c) Exemption	claim-	Check the box if either grante	or or grantee is c	alming exemptio	n from trans	sfer tax and explain.
MONTH	ANSFER IMM-DD-YYYY 15 10 DAY YEAR	fron	it a substantial financial penali	ty could be trigg	ered by developn	nent, subd.v	ee Growth, or Working Water- isson, partition or change in use. _ CLASSIFIED
In the transfer w	CUMSTANCES—Were the child suggest that the part walue? If yes, check	orice paid w	as either more or less '	10. INCOME	Sellerha	income tax s qualified a	s a Maine resident
	_	4)	l Consider	ation for the ure sale	ceived from the State Tex Assessor e property is less than \$50,000
11. OATH	Aware of pensition our knowledge of Grantee	toclustates	true, correct, and complete Gr	fourted s) and Cra	कर्तिग्राम that we ha intor(s) or their ac effects of the	ve each exa ithorized ay	mined this return and to the best of entis) are required to sign below: Date 3 // 2 // P
	Grantee		Date	Grantor	7)		Date
12. PREPARER	many of rightier .	S & W Associ			Phone Number	207-829-6363	
_	Mailing Address	P O Box 27	75, Cumberland, ME 04021		Email Address	tsnowlaw@	maine ir com
					fax Number	207-829-44	181

Rev. 12/15

Merits: 0011838934604 Trips: 8181140690009



MAINE REVENUE SERVICES

	12RETTD*			TE TRANSFER TA CLARATION	AX			
	TTD			. §§ 4641-4641N		2.19	3.10 15	:20P-M
1. County			33 1,111 113	. 33 1071 107111		1110		:007 -M
SAGADA	AHOC					Ö	018R- <i>0</i> Transfer Ta	
2. Municipalit	y/Township							\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
BATH			-				2018 —	-1710)
3. GRANTEE/ PURCHASER	3a) Name LAST or BU WASHING' 3c) Name, LAST or BU	TON P	ROPERTY	MANAGEMENT		BC	ok/page—regist	RY USE ONLY
	3e) Mailing Address a P.O. BOX	fter purchase C 634	of this property					
	BRUNSWI	CK					agi State ME	04011
4. GRANTOR/ SELLER	4a) Name, LAST or BU CITY OF		MI					
	4c) Name. LAST or BU	SINĘSS. FIRST.	MI					
	4e) Mailing Address 55 FRON	r stri	EET					
	4f) City BATH						4g) State ME	4h) ZIP Code 04530
5. PROPERTY	5a) Map 28 5c) Physical Location 41-43 L.T.I	Block NCOLN	27 STREET,		describes the Check any the No tax Multipl	e property being	r the code number the g sold. (See Instruction 5d) Acreage	t best (s)—»
6.TRANSFERT	AX 6a) Purchase	Price ((f th	e transfer is a gift, e	————————————————————————————————————		6a '		0.00
		et Value (e	nter a value only if	you entered "0" in 6a)	or	6b	22	25700 .00
	6c) Exemption	claim – 🗸	Check the box if eit	ther grantor or grantee is	claiming exe	emption from	transfer tax and ex	plain.
36 MRS 4641	(5) MUNICIPAL D	EED BACK	TO DELINQUENT	TAXPAYER				
D3 MONTH	ANSFER (MM-DD-YYY O(\$\int Zol\forall S\) DAY YEAR	fro	nt a substantial finan	-if the property is classificial penalty could be trig	ed as Farmlai gered by dev	nd, Open Spa /elopment, su	ce, Tree Growth, or abdivision, partition	Working Water- or change in use, CLASSIFIED
in the transfer w	CUMSTANCES—Were which suggest that the ket value? If yes, check	price paid v	as either more or les	10. INCOM	√ Sel	incom lier has qualif	s) not required to we e tax because: ied as a Maine resid en received from th	
					✓ Co		or the property is le	
11. OATH	Aware of penalt our knowledge an	iles as set fo d belief, it is	rth by 36 M.R.S. § 46 true, correct, and co	641-K, we hereby swear o mplete. Grantee(s) and G	rantor(s) or ti	heir autholijze	ed agent(s) are regu	ired to sian below:
	_			Granto		imu	Litt	Date 2/28/18
/- ADEC:	Grantee			Granto	or <u>//</u>			Date
12. PREPARER	Name of Preparer		L. SMITH, ESQ.		, Phone Nu			
	Mailing Address		NT STREET		. Email Add	iress	nainestatelaw.com	
		RKUNSA	VICK, ME 04011		Fax Numb	oer <u>(207)</u> :	373-9030	

Rev. 12/15

Merits: 0011838935210 Trips: 8181140690021

	0
--	---

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

1	2RETTD		DECL	ARATION		_		•		
RE1	rtd		TITLE 36, M.R.S.A. S	SECTIONS §§4641-	-4641N	13	2/119	F 10:	01 A.	M
1. County						l l				
SAGADAI	HOC							8 R- Ol ransfer Tax		_
2. Municipality/	Township					1 ,	/ -	Total	meter 121	Ŕ
BATH] (8 - 1	• • • •)
3. GRANTEE/ PURCHASER		***] `	_BOOK/P	AGE—REGISTE	IY USE ONLY	
rollelmam	3a) Name LAST or BUSI WHITTEN,				· · · · · · · · · · · · · · · · · · ·					
	3c) Name, LAST or BUSI	NESS, EIRS	T.ML				l L			
	ANDERSON 3el Mailing Address	, WI	SNDY							
	28 LOMBA	RD I	HILL ROAD							
	I) City LIMERICK						1	ME	04048	
4. GRANTOR/	4a) Name, LAST or BUS						 '	ton and an analysis of the second	\$ 	······································
SELLER	PERT, VI	CTOI		<u> </u>]				
	WHITTEN,									
	4e) Mailing Address			PP-1 - III III.						
	28 LOMBA	RD I	HILL ROAD							
	4f) City							4g) State	4h) Zip Co	
	LIMERICK	·						ME	04048	5
5. PROPERTY	Sa) Map	Bloc		Sub-Lot				code number that l. (See instruction:		1
	20		030	<u> </u>		ny that apply lo tax maps ex		d) Acreage	·	
ſ	5c) Physical Location 1220 HIGH	Cm		7 MTI	إيسةا	io tax maps e. Iultiple parce	,	n Acteage	0	\neg
<u>.</u>	TSSA UTRU	I SI	REET, BATH	I, ME	P	ortion of parc	el			
6.TRANSFERTA	X ба) Purchase i	Price (If	the transfer is a gift, er	nter "0")		ба				.00
	6b) Fair Marke if 6a) was of n		(enter a value only if y	you entered "0" in 6a) or	آ ہے			33800	.00
	•					6b				.00
26 tmp 5 46			j Check the box if eith	ier grantor or grantee i	is ciaimii	ng exemption	from trans	irer tax and exp	ylain.	
	41 - c (11) DEE NSFER (MM-DD-YYY)		S. WARNING TO BUYER-I	If the property is classi	fied as F	armland One	n Space Tr	roe Grouth or	Morking Mate	
3-1	1-18		ront a substantial financi	ial penalty could be tri	iggered	by developme	ent, subdiv	ision, partition	or change in	use.
MONTH 9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were t	here any	special circumstances	(T) 10.INCO	METAY	WITHHELD -	liver(c) no	 t required to w	CLASSI	
In the transfer w		price paid	d was either more or less	, U	<u>.</u>	i	ncome tax	because:		c
thor its fair main	e value? Il yes, elleck	THE DOX	and explain.	Reductive Productive Productive and the law and the la	ן נו	-	•	s a Maine resid ceived from th		sessor
						=		e property is le	ss than \$50,0f	00
11. OATH	Awara of nanalti	los as sot	forth by Title 36 §4641-	V wo barely arrest	<u>L</u>	Foreclosus				
	our knowledge and	d belief, i	t is true, correct, and com	nplete. Grantee(s) and (Grantor	s) or their aut	horized ag	ent(s) are requ	ired to sign b	elow:
	Grantee KANOLL			3-15-18 Gran	I.a.	CO-11) ha	IFT _		Date <u>3 ~ 15</u>	-18
12. PREPARER	atomice-Orientaria		Law, PLLC	<u> </u>			07-625-9200		Date	
	Name of Preparer Mailing Address	P.O. Bo				itte ivoitibel -		eritagelawme.c	om	
Ī	maining Address	Cornis	h, ME 04020		<u> </u>	-	207-625-92	201		

PROCESSED ONLINE. DO NOT RE-PROCESS

DLN: 1001840023361

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

 Registry
 Sagadahoc

 Date Recorded
 03/23/2018

 Time Recorded
 12:36:00 PM

 ansfer Tax Amount
 \$682.00

 Document Number
 2018r-01855

	E TROCESS.	DECLARA			Time Recorded	12:36:00 PI	M
RET	TD	TITLE 36, M.R.S.A. SECTION	DNS §§4641-464	1N Tran	sfer Tax Amount	\$682.00	
Sagadahoc	;	í			ocument Number		5
1. County						2018	
BATH						1855	· · · · · · · · · · · · · · · · · · ·
2. Municipality/	Township				BOOK/PAGE—REG		
3. GRANTEE/ PURCHASER					DOONTAGE—REG	-	
PURCHASER	SIEGEL 3a) Name (LAST)	SHANNON (FIRST)		(MI)	3b) SSN or Feder	al ID	
	SIEGEL	FRANCIS		V,			
	3c) Name (LAST)	(FIRST)		(MI)	L 3d) SSN or Feder	al ID	
	165 EDDY ROA	D					
	3e) Mailing Address						
	EDGECOMB				ME	04556	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	
SELLER	TAYLOR	CHRISTOPH	ER	J	41.26611 5 1	LID	
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	aliD	
	TAYLOR 4c) Name (LAST)	SHELLEY (FIRST)		G (MI)	4d) SSN or Feder	al ID	
	447 MIDDLE ST				,0,00,00,00		
	4e) Mailing Address						
	BATH				ME	04530	
	4f) City				4g) St	ate 4h) Zip Coo	de
5. PROPERTY	28	267			—Enter the code number by being sold . (See instruc		
	L		Sub-Lot Chec	ck any that apply No tax maps e			
	67 ACADEMY S	STREET		Multiple parce			
	5c) Physical Location			Portion of pare	cel 5d) Acreage		
6. TRANSFER TAX	(6a) Purchase Price ((If the transfer is a gift, enter "O	")	6a	\$155,000		.00
		ie (enter a value only if you en	tered "0" in 6a) or	[.00
	if 6a) was of nomina	<u></u>		6b			.00
	6c) Exemption claim	 Check the box if either gran 	ntor or grantee is clai	ming exemption	n from transfer tax and	l explain.	
7. DATE OF TRAN	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the p		•	•	-	
	23 2018	front a substantial financial pena	aity could be trigger	ea by aevelopm	ent, subdivision, parti	tion or change in t	
	DAY YEAR JMSTANCES—Were there a	ny special circumstances	10. INCOME TA	XX WITHHELD-	Buyer(s) not required	li	
	ich suggest that the price p et value? If yes, check the bo	paid was either more or less			income tax because:		
ulati its lali illarki	et value: II yes, check the bo	ox and explain.			qualified as a Maine r nas been received fror		sessor
				_	ation for the property	is less than \$50,00	00
11 OATU	A	a family backets to the		Foreclosu		A	
11. OATH		set forth by Title 36 §4641-K, we h f, it is true, correct, and complete.					
		IER J TAYLOR Date 03/20				Date03/26/	
	Grantee SHELLEY G	TAYLOR Date 03/20	6/2018 Grantor _	FRANCIS S	SIEGEL	Date03/26/	2018
12. PREPARER		GEL BROADWATER		Phone Number			
	Maning Address	D. BOX 924		E-Mail Address	angel@broadwaterla	w.org	

Merits: 0011838936524 Trips: 8181140690049



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

PLEASE TYPE OR PRINT CLEARLY

	99900*	DEC	LARAHON		2.00.10		~~ ~~
		TITLE 36, M.R.S.A			26416	12	:39 P.M
K	ETTD	PLEASE TYPE	OR PRINT CLE	ARLY	2018	R- 01	851
1. COUNTY		DO NOT	USE RED INK	<u> </u>			
SAGADA	HOC,	<u></u>			State of N	iaine Tra	x of
2. MUNICIPALI	TYTOWNELLID						- 1857)
BATH	THOWNSHIP						RY USE ONLY
3. GRANTEE/	3a) Name (LAST, FIRST, MI)						
PURCHASER	WILLIAMS,	IVY KATHERI	NE				
	3c) Name (LAST, FIRST, MI)						
		1-1-1-1-1-1-1-1	* * * * * * * * * * * * * * * * * * * *		<u> </u>		
	3e) Mailing Address						ı
	PO BOX 960			1 1 7 V 1		7-) Canas	³ 3h) Zip Code
	RANGELEY ,	<u> </u>				3g) State ME	04970
4. GRANTOR/	4a) Name (LAST, FIRST, MI) WILLIAMS, E	ST. OF THO	RNTON WA	र करा र	,,,,,,		
SELLER		Dr. OF THO	IMION WA				
	4c) Name (LAST, FIRST, MI)						
	4e) Mailing Address	<u> </u>					
	PO BOX 960						
	4f) City	<u> </u>	Y + Y Y Y Y	 		4g) State	a 4h) Zîp Code
	RANGELEY					ME	04970
5. PROPERTY	Sa) Map Blo		Sub-Lot	Check any th			rty—Enter the code
	<u> 25 – </u>	08	4	<u>-</u>	beir		describes the property structions) 2 0 7
	Sc) Physical Location			=	maps exist	id) Acreage:	
	136 BEDFORD	ST			le parcels 5 n of parcel 2	u) Acceage,	1
6. TRANSFER					TOI Paicei		• • • • • • • • • • • • • • • • • • • •
TAX	ба) Purchase Price (if th				\$,	<u></u>	,0.00
	6b) Fair Market Value (e if 6a) was of nominal va		entered "0" in 6a) o	or 6b	€	1	40000.00
					<u> </u>		
	6c) Exemption claim − 🗸	Check the box if either g	rantor or grantee is o	laiming exemption	on from transfer to	ax and explai	n.
	DEED OF DISTRIBUTION	N					ļ
	7. DATE OF TRANSFER (MN	4 DD 10000					
) BUYER-If the pro Substantial finance			
		0,(,8,		rtition or change i	0.1150	LASSIFIED	-,
9. SPECIAL CIRCI	MONTH DAY JMSTANCES—Were there an	YEAR v special circumstances in	the transfer	10. INCOME TAX			quired to withhold
which suggest th	at the price paid was either r	nore or less than its fair m	arket value?				tax because:
If yes, check the I	oox and explain;			√ Seile	r has qualified as	a Maine resid	lent
				☐A wa	iver has been rece	eived from th	e State Tax Assessor
					ideration for the		
11.OATH	Aware of penalties as se our knowledge and belies	et forth by Title 36 §4641-	K, we hereby swear o	y affirm that we h	iave each examin	ed this return	and to the best of
		. " (1) // // "	anks Gra	Joy Hat	beine 11	Whine	
	Grantee /	Date		ntor			Date
12. PREPARER		rt Daviau Esq		Phone Num	her 207-86		
		ox 397		Phone Num E-Mail Addr	hdawia		rpoint.net
•	Rang	eley ME 04970	_	& Meli Addi	<u></u>		

DLN: 1001840023379

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	03/23/2018
Time Recorded	02:01:00 PM
Transfer Tax Amount	\$0.00
Document Number	2018r-01868
Book	2018
Page	1868
2	

DO NOT	RE-PROCESS.	DECLA	DATION	^		Date	ecorded _	03/23/201	5
	TTD	TITLE 36, M.R.S.A. SEC	RATION	641N		Time F	Recorded _	02:01:00 I	<u>'M</u> _
- RE		111LE 30, M.N.S.A. SEC	.110113 994041-40	04 I N	Tran	sfer Tax	Amount _	\$0.00	
Sagadaho	С				Do	ocument	Number	2018r-018	68
1. County							Book -	2018	
BATH									-
2. Municipality	//Township					POOK/	Page _	TRY USE ONLY	
3. GRANTEE/ PURCHASER	96 SHENANDO	OAH ROAD, LLC			(MI)		SSN or Federa		
	3c) Name (LAST)	(FIRST)			(MI)	3d	SSN or Federa	IID	
	1 SHENANDO	AH ROAD							
	3e) Mailing Address BATH						ME	04530	
	3f) City						3g) State	3h) Zip Code	<u>-</u>
4. GRANTOR/ SELLER	EMERSON 4a) Name (LAST)	JANET (FIRST)			S (MI)	4b	SSN or Federa	1 ID	
	EMERSON 4c) Name (LAST)	KENNETH (first)	I		I (MI)	4d	SSN or Federa	i ID	
	1 SHENANDO	AH ROAD							
	4e) Mailing Address							- ———	
	BATH 4f) City						ME 4g) Stat	04530 4h) Zip C	ode
5. PROPERTY	41) City		1	5b) Type of p	oroperty	Enter the	code number t	hat best	
	023 5a) Map	Block Lot	Sub-Lot C	heck any tha	at apply	ý:	d . (See instructi	ons)—» 201	
	96 OLD BRUNS	SMICK BOAD	1	No tax Multipl			0.10		
	5c) Physical Location	JWICK ROLD		Portion		el L	id) Acreage		
5. TRANSFER TA	AX 6a) Purchase Price	e (If the transfer is a gift, ente	r"()")		6a	\$0			7.00
		lue (enter a value only if you		nr.	"	ΨΟ			╡.。,
	if 6a) was of nomin		rentered o irrody	OI.	6b	\$70,10	00		.00
	6c) Exemption claim	$n- \overline{X} $ Check the box if either c	grantor or grantee is o	claiming exe	mptio	n from trai	nsfer tax and	explain.	
Deed into	LLC pursuant to T	Title 36, M.R.S.A. Sec	tion 4641-C (1	.8)					
7. DATE OF TRA	ANSFER (MM-DD-YYYY) 23 2018 DAY YEAR	8. WARNING TO BUYER-If th front a substantial financial p						-	n use.
o. SPECIAL CIRC n the transfer v	CUMSTANCES—Were there	paid was either more or less	10. INCOME	X Se	ller has waiver l onsider	income ta qualified nas been r	x because: as a Maine re eceived from	o withhold Main sident the State Tax A sless than \$50,0	ssessor
1. OATH		s set forth by Title 36 §4641-K, v ief, it is true, correct, and comple							
	Grantee JANET S E							LGate 03/26	5/2018
			3/26/2018 Granto					Date 03/26	5/2018
2. PREPARER		ATELYNNE AIKEN		Phone Nu	ımber.				
	Maining Address	CITY CENTER SUITE 400		E-Mail Ad	ldress	kaiken@	hablaw.com		
	P(ORTLAND, ME 04101		Fax Num	ber				

Merits: 0011838936423 Trips: 8181140690047



RETTD

1. COUNTY

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

TITLE 36, M.R.S.A. SECTIONS 4641-4641N

PLEASE TYPE OR PRINT CLEARLY

DO NOT USE RED INK!

03/23/2018 02:17 PM

2018R-01870

Transfer Tax of 334.40

SAGADAI	HOC		7	Transfer Tax OUNTY MAINE
2. MUNICIPALIT	Y/TOWNSHIP	(2018-	
BATH		B	QQK/PAGE—REGISTI	
3. GRANTEE/	3a) Name (LAST, FIRST, MI)			
PURCHASER	SANDERS, JAMES			
	3c) Name (LAST, FIRST, MI)	<u>-11</u>		
	3e) Mailing Address			
	PQ BOX 7872			-
	3f) City 2		3g) State	3h) Zip Code
	LOKTLAND	<u> </u>	_ ne	04112
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) NATIONSTAR MORTGAGE LLC			
	4c) Name (LAST, FIRST, MI)			
	4e) Mailing Address			
	8950 CYPRESS WATERS BLVD.	1 - 1 - 1 - 1 - 1	***	
	4f)City		4g) State	4h) Zip Code
	COPPELL	·	TX	75019
5. PROPERTY		any that apply:		rty—Enter the code
	26 168 -	, ,,,	being sold. (See in:	describes the property structions) 201
	50) 1 1931 COLUMN	No tax maps exi:	st }	271
	A TA WASA INGTUNESERS SEED	Viultiple parcels		
	<u> </u>	ortion of parcel		<u> </u>
6.TRANSFER TAX	C-) Duranta and Differ to the state of the s	- C	7	6000. 00
IAA	6a) Purchase Price (If the transfer is a gift, enter "0")	6a S	<u> </u>	·
IAA	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	***************************************	7	
IAA	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	6b \$		
IAA	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or	6b \$		
IAX	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	6b \$		
IAX	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	6b \$		
IAX	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe	6b \$	ansfer tax and explai	,, 00 n.
IAX	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the state of	6b \$	ansfer tax and explai	n.
IAX	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim – Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 8. WARNING TO BUYER-If to Tree Growth, a Substantial of Subdivision, partition or chains.	6b \$temption from tra	ansfer tax and explai	n.
	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 8. WARNING TO BUYER-lift Tree Growth, a Substantial (subdivision, partition or check the box if either grantor or grantee is claiming execution.	6b \$t emption from tra the property is of financial penalty ange in use.	ansfer tax and explai	n. d, Open Space or by development,
	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 8. WARNING TO BUYER-lift Tree Growth, a Substantial (subdivision, partition or check the box if either grantor or grantee is claiming execution.	6b \$t emption from tra the property is of financial penalty ange in use.	ansfer tax and explai	d, Open Space or by development,
	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 10. INCOMe at the price paid was either more or less than its fair market value?	6b \$the property is confinencial penalty ange in use.	ansfer tax and explai	d, Open Space or by development, quired to withhold tax because:
9. SPECIAL CIRCL which suggest th	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR MONTH DAY	emption from traces the property is confinencial penalty ange in use.	ansfer tax and explait assified as Farmland y could be triggered CLASSIFIED LD—Buyer(s) not recondented.	i, Open Space or by development, quired to withhold - tax because:
9. SPECIAL CIRCU which suggest th If yes, check the b	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR MONTH DAY	emption from traces the property is confinential penalty ange in use. Seller has qual A waiver has b	ansfer tax and explain the state of the stat	i, Open Space or by development, quired to withhold tax because: dent te State Tax Assessor
9. SPECIAL CIRCU which suggest th If yes, check the b	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR MONTH DAY	emption from traces the property is consideration from traces. ETAX WITHHELD A walver has be consideration	ansfer tax and explait the string of the str	d, Open Space or by development, quired to withhold tax because: dent se State Tax Assessor ass than \$50,000
9. SPECIAL CIRCI which suggest th If yes, check the b Foreclosure	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 10. INCOMe at the price paid was either more or less than its fair market value? Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm that our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grante(s)	emption from traces the property is consideration from traces the property is consideration. Seller has qual A waiver has book consideration to we have each	ansfer tax and explain the string of the property is le examined this return the property is le examined this return the property is le examined this return the dagent(s) are required agent(s) are required.	d, Open Space or by development, quired to withhold tax because: dent se State Tax Assessor ass than \$50,000 an and to the best of sired to sign below:
9. SPECIAL CIRCI which suggest th If yes, check the b Foreclosure	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 10. INCOMe at the price paid was either more or less than its fair market value? Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm that our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grante (s) Grantee WITH WAY ARRY Grantee Grantee Grantee(s) and Grantee	emption from traces the property is of financial penalty ange in use. BETAX WITHHELE Seller has qual A waiver has b Consideration to we have each authorized to the financial penalty and the financial penalty and the financial penalty authorized to the financial penalty authoriz	ansfer tax and explain ansfer tax and ansfer tax and explain and explain ansfer tax and explain and explain ansfer tax and explain and explain ansfer tax and explain and explain and explain and explain ansfer tax and explain and explain and explain and explain and explain and explain and ex	d, Open Space or by development, quired to withhold tax because: dent se State Tax Assessor ass than \$50,000 an and to the best of
9. SPECIAL CIRCI which suggest th If yes, check the b Foreclosure	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 MONTH DAY YEAR 10. INCOMe at the price paid was either more or less than its fair market value? Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm that our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grante (s) Grantee WITH WAY ARRY Grantee Grantee Grantee(s) and Grantee	emption from tra	ansfer tax and explain ansfer tax and explain as fermion as fermio	d, Open Space or by development, quired to withhold tax because: dent se State Tax Assessor ass than \$50,000 an and to the best of sired to sign below:
9. SPECIAL CIRCI which suggest th If yes, check the b Foreclosure	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exe 7. DATE OF TRANSFER (MM-DD-YYYY) 03-31-2017 Tree Growth, a Substantial subdivision, partition or che MONTH DAY YEAR IMSTANCES—Were there any special circumstances in the transfer ox and explain: Sale Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear or affirm that our knowledge and belief, it is true, correct, and complete. Grantee(s) and Granto (s) Grantee Date Grantor	emption from tra	ansfer tax and explain ansfer tax and explain assified as Farmland y could be triggered and could be triggered and could be triggered and could be triggered as a Maine resident received from the property is left as a maine and this return and agent(s) are required.	d, Open Space or by development, quired to withhold tax because: dent the State Tax Assessor tax than \$50,000 to and to the best of sired to sign below:
9. SPECIAL CIRCI which suggest th If yes, check the b Foreclosure 11. OATH	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim — Check the box if either grantor or grantee is claiming exemption claim — Check the box if either grantor or grantee is claiming exemption claim — Check the box if either grantor or grantee is claiming exemption or claim — Check the box if either grantor or grantee is claiming exemption or grantee is claim	emption from traces the property is of financial penalty ange in use. Seller has qual A waiver has be Consideration to we have each by their authorization was a Number 40 a	ansfer tax and explain ansfer tax and explain as fermion as fermio	di, Open Space or by development, quired to withhold tax because: dent the State Tax Assessor tax than \$50,000 to and to the best of the dired to sign below:

Merits: 0011838938340 Trips: 8181140690081

12RETTD RETTD	00
1. County	
SAGADAHOC	

MAINE REVENUE SERVICES

*	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	00	REAL ESTATE T DECLAR	RATION		3 1031 1	<i>ې</i> م	- u 1 D	
1. County		·	36 M.R.S. §§ 4	1041-4641N	~			:14 P.	M
SAGADA	HOC		7			JU ()	R. O		-
2. Municipality	/Township					Blate of	Maine Tra	x of O insier Tax NTY MAIN	
BATH]	SACADA	HOC COU	NTY MAIN	忾
3. Grantee/ Purchaser	3a) Name LAST or BUS	INISSE TIMET A				1 -	AGE—REGISTR	, ,)
	ATIENZA	COMME	RCIAL REAL	TY, LLC		7			
	3c) Name, I AST or BUS	NESS, FIRST, M			·	! []			
	3e) Malling Address aft 11 PAGE	er purchase of STREE'	this property		#				
	3f) City BATH						ME [04530	_
4. GRANTOR/ SELLER	4a) Name, LAST or BUS	NESS, FIRST, M				7 (_ 		!
	4cl Name, LAST or BUSI		, James] [
	4e) Mailing Address				******	_] [
		7872	· · · · · · · · · · · · · · · · · · ·						
	4f) City						4g) State	4h) ZIP Code	<u> </u>
	PORTLAND						ME	04112	
5. PROPERTY	5a) Map	Block	Lot	Sub-Lot	5b) Type of prope describes the prop	rty—Enter the co	ode number that	pest	=
	26		128		heck any that ap	ply:			
ſ	5c) Physical Location				No tax map Multiple par		Acreage		7
	854 WASHI	NGTON	STREET		Portion of p			•	
6.TRANSFERTA	X 6a) Purchase I	Price (If the	transfer is a gift, enter '	'O")	6				.00
	6b) Fair Marke if 6a) was of n		er a value only if you e e)	entered "0" in 6a) o	or 6t		7	6000	.00
			Check the box if either gr	antor or grantee is o		1			
Deed from s			4641-c (15) (c).0						\neg
7. DATE OF TRA	NSFER (MM-DD-YYY) 2 2018	/) 8.W/	ARNING TO BUYER-If the a substantial financial pe	property is classifie	d as Farmland, C	pen Space, Tre	e Growth, or V	orking Water-	se.
9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were t	here any spec	cial circumstances	10. INCOME	TAX WITHHELD	- Buyer(s) not	required to wi		
	hich suggest that the ket value? If yes, check				✓ Seller h	income tax i	oecause: a Maine reside	•nt	
			<u> </u>					State Tax Asse	essor
						eration for the sure,sāle	property is les	s than \$50,000	I
11. OATH	Aware of penalti	es as set fort	h by 36 M.R.S. § 4641-K,	we hereby swear or	affirm that we h	ave each exan	nined this retu	n and to the b	est of
	our knowledge and	i belief, it is tr	ue, correct, and complete	e. Grantee(s) and Gr	antor(s) or their	thorized age	ent(s) are requi	red to sign belo	ow: Z ~ (P)
	Grantee NEARTAIN Grantee		ent Date	Granto	7			ate <u>5 </u>	<u>~ · · · ·</u> · ·
12. PREPARER		S & W Associa		Granto	Phone Number	r 207-829-6363			
	Mailing Address	P.O. box 275	, Cumberland, ME 04021		Email Address	tsnowlaw@i	naine.m.com		
	,				Fax Number	207-829-44	31		

Rev. 12/15

DLN: _1001840022461

MAINE REVENUE SERVICES

Registry Sagadahoc

DO NOT	RE-PROCESS.	REAL ESTATE I		^		Date Record	ed <u>03/</u>	26/2018	
		DECLAF			7	Гіте Record	ed <u>09:</u>	20:00 Al	M
KE	TTD	TITLE 36, M.R.S.A. SEC	HONS \$\$4641-46	541N	Transfe	er Tax Amou	ınt <u>\$0.</u>	00	
Sagadaho	c				Doc	ument Numb	per 201	8r-0193	1
1. County							ok 201	_	
BATH							ige 193		
2. Municipality	/Township					BOOK/PAGE—			
3. GRANTEE/ PURCHASER	WOLFEL 3a) Name (LAST) WOLFEL	KENDRA (FIRST) TRAVIS		L	V (MI) J	3b) SSN or			
	3c) Name (LAST)	(FIRST)			(MI)	3d) SSN or	Federal ID		
	237 HIGH STREI	ET							
	BATH 3f) City					3g) S		04530 3h) Zip Code	
4. GRANTOR/ SELLER	RICHARDS 4a) Name (LAST)	KENDRA (FIRST)			V (MI)	4b) SSN or	Federal ID		
	WOLFEL 4c) Name (LAST)	TRAVIS			J (MI)	4d) SSN or	Federal ID		
	237 HIGH STREI	ET				,			
	4e) Mailing Address								
	BATH						Æ L	04530	
r ppopenty	4f) City			5h\ T	-f		lg) State	4h) Zip Cod	e
5. PROPERTY	38 5a) Map Blo	ck Lot		describes		Enter the code nu being sold . (See ir			
	237 HIGH STREI			_	ax maps exis	ot 0.3			
	5c) Physical Location	21			ion of parcel	5d) Acrea			
6. TRANSFER TA	V.	f the transfer is a gift, enter	"O")		6a S	60	<u></u>		.00
	6b) Fair Market Value	e (enter a value only if you		or	 [a	3169,100			
	if 6a) was of nomina	•			∞ ∟				.00
CORREC	6c) Exemption claim – CTING NAME	$\overline{\mathrm{X}}$ Check the box if either g	rantor or grantee is c	laiming	exemption fi	rom transfer tax	and expla	ain.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY) 15 DAY 2018 YEAR	8. WARNING TO BUYER-If the front a substantial financial p	enalty could be trigg	ered by	developmen	t, subdivision,	partition o	r change in u	ise. IED
	CUMSTANCES—Were there an which suggest that the price pa		10. INCOME	TAX WIT		yer(s) not requ come tax becau		hhold Maine	
	ket value? If yes, check the box			X		ualified as a Ma			
				F		s been received on for the prop Sale			
11. OATH	•	et forth by Title 36 §4641-K, w it is true, correct, and comple RICHARDS Date03	te. Grantee(s) and Gr	antor(s)	: we have ea	ch examined th orized agent(s)	are require		low:
	Grantee TRAVIS J Wo		/27/2018 Granto	TED.	AVIS J W		Da	02/27/2	
12. PREPARER		NIFER LANDER				412) 927-0226			
	Maining Address	INDUSTRY DRIVE		E-Mail	Addressj	ennifer.lander@	zvisionetsy	stems.com	

DLN: 1001840020552

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	03/26/2018
Time Recorded	09:20:00 AM
Fam Tary Amazant	\$0.00

DO NOT	RE-PROCES	S DECLARATION			Date Recorded	03/20/2010	<i></i>
		DECEMBATION			Time Recorded	09:20:00 A	<u>M_</u> _
KE	TTD	TITLE 36, M.R.S.A. SECTIONS §§	4641-4641N	Tran	sfer Tax Amount	\$0.00	
Sagadaho	ос				ocument Number		31
1. County							<u> </u>
BATH			1			2018	
2. Municipality	y/Township		_		Page	1931	
3. GRANTEE/					BOOK/PAGE—REG	GISTRY USE ONLY	
PURCHASER	WOLFEL	KENDRA		V			
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Fed	eral ID	
	WOLFEL	TRAVIS		J			
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Fede	eral ID	
	237 HIGH S	TREET					
	3e) Mailing Address			-			
	BATH				ME		
4. GRANTOR/	3f) City		•		3g) State	3h) Zip Code	
SELLER	RICHARDS	NOW KNOWNENDRA V	/. WOLFEL	V			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Fede	eral ID	
	4c) Name (LAST)	(FIRST)		1 (MI)	4d) SSN or Fede	eral ID	
	237 HIGH S	TREET]			
	4e) Mailing Address					04520	1655
	BATH 4f) City	***************************************			ME		
5. PROPERTY	41) City			e of property	4g) S y—Enter the code numb		oue
	38	100	describe		ty being sold . (See instru		
	5a) Map	Block Lot Sub-Lot		tax maps e	•		
	237 HIGH S	TREET, BATH, ME 04530	1 -	Itiple parce tion of par	1 0.55		
4 TO A NOTED TO	5c) Physical Location			ion or pur	5d) Acreage		7
6. TRANSFER TA	ба) Purchase I	Price (If the transfer is a gift, enter "0")		6a	\$0		.00
	6b) Fair Marke	et Value (enter a value only if you entered "C)" in 6a) or		\$169,100		م آ
	if 6a) was of n	ominal value)		6b	\$109,100		00
	6c) Exemption	claim – \boxed{X} Check the box if either grantor or g	rantee is claiming	exemptio	n from transfer tax an	ıd explain.	
TRANSF	ER BETWEEN	SPOUSES, 4641-C(4)					
7. DATE OF TRA	ANSFER (MM-DD-YYY)	8. WARNING TO BUYER-If the property	is classified as Far	mland, Op	en Space, Tree Growt	h, or Working Wate	er-
02	05 2018	front a substantial financial penalty coul	ld be triggered by	developm	nent, subdivision, part	— "	
MONTH	DAY YEAR					CLASS	
		here any special circumstances 10. price paid was either more or less	. INCOME TAX WI		Buyer(s) not required income tax because:		e
than its fair mar	rket value? If yes, check	the box and explain: \overline{X}	X	_	s qualified as a Maine		
			V	7	has been received fro		
TRANSF	ER BETWEEN	SPOUSES, 4641-C(4)		Foreclosu	ation for the property are Sale	/ 15 1655 than \$50,0	00
11. OATH		ies as set forth by Title 36 §4641-K, we hereby s		t we have	each examined this r		
	YETTE	d belief, it is true, correct, and complete. Grantee			•		
		RA V RICHARDS NO W _{at} NO W 03/26/2018 Date 03/26/2018			WOLFEL WOLFEL	Date 03/26 Date 03/26	
12. PREPARER	Grantee	DateDateDateDate			(12.1) 2.1. 2.2.	Date	72016
NEI ANER	Name of Preparer	127 JOHN CLARKE ROAD		e Number . il Address	DOCREVIEWDEP	T@SOLIDIFI.CO	<u>—</u> М
	Mailing Address	MIDDLETOWN, RI 02842		umber			
		/	I UA IV				

Merits: 0011838936221 Trips: 8181140690043



MAINE REVENUE SERVICES

rtn	TITLE 36 M R S A SECTIONS			
	TITLE 30, WILLIAM, SECTIONS	334041-404114		
HOC.	·			
_ 	<u>-</u>			
riownship			Emin of Main	Transfor Tay
			(2018.	一 (434-)
SLACK, I	KATHARINE W.		BOOK/PAGE—RE	SISTRY USE ONLY
1	ITAL DRIVE		}	- 3h) Zip Code
WEST BAT	TH		ME	04530
GIBSON, 4c) Name. LAST or BUS 4e) Malling Address	LOREN M.		i	
4f) City TOPSHAM				
5a) Map 31 5c) Physical Location 18 PINE I	051 1	8 describes to Check any to The No ta	the property being sold. (See instru that apply: ax maps exist 5d) Acreage iple parcels	
X 62) Purchase	Price (If the transfer is a sift enter "O")		£-	136000.00
6b) Fair Mark	et Value (enter a value only if you entere	d "0" in 6a) or	<u> </u>	.00.
		or grantee is claiming e		
		- grande is defining to	and the second second to Adil	e unpune as a magerian and as
14 2018		rty is classified as Farm could be triggered by d	land, Open Space, Tree Growth levelopment, subdivision, part	n, or Working Water- ition or change in use.
hich suggest that the	price paid was either more or less		income tax because: Seller has qualified as a Maine A waiver has been received fro Consideration for the property	resident m the State Tax Assessor
Aware of penalt our knowledge an Grantee	d bellef, it is true-correct, and complete! Gran	by swear or affirm that	we have each examined this re	eturn and to the best of required to sign below:
Grantee	Date //	Grantor		Date
Name of Preparer	David A. King, Esq.	Phone N		
Mailing Address	108 Front Street, Bath, ME 04530	E-Mail A	4001622	@comcast.net
	http://www.maine.gov/revenue/propor	•	unei	
	HOC Township 3a) Name LAST or BUS SLACK, I SLA	HOC Township TITLE 36, M.R.S.A. SECTIONS HOC Township TITLE 36, M.R.S.A. SECTIONS HOC Township TITLE 36, M.R.S.A. SECTIONS TOWNShip SLACK, KATHARINE W. 3c) Name, LAST or BUSINESS, FIRST, MI SLACK, KATHARINE W. 3c) Name, LAST or BUSINESS, FIRST, MI 4a) Name, LAST or BUSINESS, FIRST, MI GIBSON, LOREN M. 4c) Name, LAST or BUSINESS, FIRST, MI 4d) Malling Address 3 BIRCH RIDGE AVENUE 4f) Caty TOPSHAM 5a) Map Block Lot Sub- 1 Sc) Physical Location 18 PINE HILL DRIVE X 6a) Purchase Price (If the transfer is a gift, enter "0") 6b) Fair Market Value (enter a value only if you entere if 6a) was of nominal value) 6c) Exemption claim - Check the box if either grantor of the price paid was either more or less et value? If yes, check the box and explain: Aware of penalties as set forth by Title 36 \$4641-K, we here our knowledgagand bellef, it is true-correct, and complete Grad Grantee Name of Preparer Mailing Address David A. King, Esq. 108 Front Street, Bath, ME 04530	HOC Township TITLE 36, M.R.S.A. SECTIONS \$\$4641-4641N HOC Township 3a) Name LAST or BUSINESS, FIRST, MI SLACK, KATHARINE W. 3c Name, LAST or BUSINESS, FIRST, MI Se) Mailing Address 3 COLONIAL DRIVE 30 (QV WEST BATH 4a) Name, LAST or BUSINESS, FIRST, MI 4a) Name, LAST or BUSINESS, FIRST, MI 4a) Name, LAST or BUSINESS, FIRST, MI 4a) Mailing Address 3 BIRCH RIDGE AVENUE 41/CRY TOPSHAM 5a) Map Book Lox Sub-tot 5b) Type TOPSHAM 5a) Map Book Lox Sub-tot 5b) Type 5c) Physical Location Not 18 PINE HILL DRIVE Not 6b) Fair Market Value (enter a value only if you entered "O" in 6a) or if 6a) was of nominal value) 6c) Exemption claim - Check the box if either grantor or grantee is claiming a front a substantial financial penalty could be triggered by Company of the Company of t	HOC 20188. Sa) Name LAST or BUSINES, FIRST, MI SLACK, KATHARINE W. 30 Name LAST or BUSINES, FIRST, MI SLACK, KATHARINE W. 30 Name LAST or BUSINES, FIRST, MI SLACK, KATHARINE W. 30 Name LAST or BUSINES, FIRST, MI GTESON, LOREN M. 40 Name LAST ar BUSINES, FIRST, MI GTESON, LOREN M. 50 Type of propery—first the code running and the second code running and the second running and the s

Merits: 0011838937231 Trips: 8181140690063

beth@pnrelderlaw.com

(207) 828-1276

Email Address

Fax Number

GAI 3cl Nam 3cl Nam 3cl Nam 61 3fl City POF	P LELAST OF BUSINESS, FIRST, INDINER, JET LAST OF BUSINESS, FIRST, INDIA STREET RTLAND LAST OF BUSINESS, FIRST, INDIA STREET LEY, ESTAT LAST OF BUSINESS, FIRST, INDIA STREET CYNTHIA S INDIA STREET LAST OF BUSINESS, FIRST, INDIA STREET CYNTHIA S LAST OF BUSINESS, FIRST, INDIA STREET CYNTHIA S LAST OF BUSINESS STREET CYNTHIA S	NNIFER J. MI. DETRIBUTION OF SIDNEY MI. TE OF SIDNEY MI.			(sa	2018R-01993 Transfer Tax of 715.00 liste of Maine Transfer Tax AGADAHOC COUNTY MAINE COLS
SAGADAHOC 2. Municipality/Townsh BATH 3. GRANTEE/ PURCHASER 3a) Nan GAI 3c) Nan GAI 3c) Nan GAI 3c) Nan GAI 3c) Nan CC/C 4c) Nan CC/C 4e) Mail 27 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 39 U 6. TRANSFER TAX 66	ARLAST OF BUSINESS, FIRST, ARD INER, JEI R. LAST OF BUSINESS, FIRST, I R. LAST OF BUSINESS, FIRST, I R. TLAND R. LAST OF BUSINESS, FIRST, I R. LAST OF	NNIFER J. MI. DETHIS PROPERTY SET, APT. 2 MI. TE OF SIDNEY MI. SEAMAN, PERS			(sa	Transfer Tax of 715.00 late of Maine Transfer Tax AGADAHOC COUNTY MAINE 20181993 //PAGE—REGISTRY USE ONLY
2. Municipality/Townsh BATH 3. GRANTEE/ PURCHASER 3a) Nan GAL 3ci Nan 6 1 3f) City POF 4. GRANTOR/ SELLER 4a) Nan C / C 4e) Mail 2 7 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 3 9 U 6. TRANSFER TAX 66	ARLAST OF BUSINESS, FIRST, ARD INER, JEI R. LAST OF BUSINESS, FIRST, I R. LAST OF BUSINESS, FIRST, I R. TLAND R. LAST OF BUSINESS, FIRST, I R. LAST OF	NNIFER J. MI. DETHIS PROPERTY SET, APT. 2 MI. TE OF SIDNEY MI. SEAMAN, PERS			(sa	State of Maine Transfer Tax AGADAHOC COUNTY MAINE 2018 1993 PAGE—REGISTRY USE ONLY SQUSTATE
BATH 3. GRANTEE/ PURCHASER 3a) Nan GAE 3c) Nam 3c) Mal 61 3f) City PO E 4. GRANTOR/ SELLER 4a) Nam C / C 4c) Mal 27 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 3 9 U 6. TRANSFER TAX 6i 6i	ARLAST OF BUSINESS, FIRST, ARD INER, JEI R. LAST OF BUSINESS, FIRST, I R. LAST OF BUSINESS, FIRST, I R. TLAND R. LAST OF BUSINESS, FIRST, I R. LAST OF	NNIFER J. MI. DETHIS PROPERTY SET, APT. 2 MI. TE OF SIDNEY MI. SEAMAN, PERS			(sa	AGADAHOC COUNTY MAINE 2018 — 1993 PAGE—REGISTRY USE ONLY SQUISTEE — 2011 615 - 2008
3. GRANTEE/ PURCHASER 3a) Nan GAI 3c) Nan GAI 3c) Nan GAI 3c) Nan GI 4c) Nan C/O 4c) Nan C/O 4e) Mail 27 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 39 U 6. TRANSFER TAX 6a	RDINER, JEI e. LAST or BUSINESS, FIRST. I INDIA STRE RTLAND e. LAST or BUSINESS, FIRST. I E. LAST or BUSINESS. FIRST. I E. LAS	NNIFER J. MI. DETHIS PROPERTY SET, APT. 2 MI. TE OF SIDNEY MI. SEAMAN, PERS				### AGU STATE - 2012 CIT SOUR
PURCHASER 3a) Nan GAI 3c) Nam 3e) Mail 6 1 3f) City PO F 4a) Nam C / C 4e) Mail 2 7 4f) City LE E 5c) Phys 3 9 U 6. TRANSFER TAX 66 61 62 63 64 65 66 66 67 68 68 68 69 70	RDINER, JEI e. LAST or BUSINESS, FIRST. I INDIA STRE RTLAND e. LAST or BUSINESS, FIRST. I E. LAST or BUSINESS. FIRST. I E. LAS	NNIFER J. MI. DETHIS PROPERTY SET, APT. 2 MI. TE OF SIDNEY MI. SEAMAN, PERS]	sg) statesnj <u>cir code</u>
4. GRANTOR/ SELLER DUL 40.Nam CC/C 4e) Mail 2 7 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 3 9 U 6. TRANSFER TAX 66	e, LAST OF BUSINESS, FIRST, LEY, ESTAT B. LAST OF BUSINESS, FIRST, CYNTHIA S Ing Address STEPPING S	TE OF SIDNEY MESEAMAN, PERS]	
4. GRANTOR/ SELLER DU L 40.Nam C / C / C 4e) Mail 2 7 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 3 9 U 6. TRANSFER TAX 66	e, LAST OF BUSINESS, FIRST, LEY, ESTAT B. LAST OF BUSINESS, FIRST, CYNTHIA S Ing Address STEPPING S	TE OF SIDNEY MESEAMAN, PERS]	
27 4f) City LEE 5. PROPERTY 5a) Ma 5c) Phys 39 T 6. TRANSFER TAX 66	STEPPING S	STONES ROAD				
5c) Phys 39 U 6. TRANSFER TAX 66	****		····			43.70 6-3-
5c) Phys [39 T] 6. TRANSFER TAX 66	Dlad.		, 			49) State 4h) ZIP Code NH 03861
6. TRANSFER TAX 66	27 Block		0		rty being sol ly: exist 5	e code number that best Id. (See instructions)—> 5d) Acreage
61	INION STRE	ET		Portion of par		.32
		e transfer is a gift, enter"0")		6a	3	162500.0
	o) Fair Market Value (er 5a) was of nominal val	nter a value only if you ente lue)	ered "0" in 6a) o	or 6b		.0
	Exemption claim –	Check the box if either grant	or or grantee is c	- 1	n from trar	
	,	, which was a state of grant	or or grande is a	animing enemption		TOTAL CAPICITA
7. DATE OF TRANSFER (MONTH DAY 9. SPECIAL CIRCUMSTAN in the transfer which sug than its fair market value	YEAR CES—Were there any sp gest that the price paid w	nt a substantial financial penal pecial circumstances vas either more or less	lty could be trigg	TAX WITHHELD	nent, subdi Buyer(s) no income ta	Tree Growth, or Working Water- ivision, partition or change in use. CLASSIFIED ot required to withhold Maine x because: as a Maine resident
	· -			A waiver Consider Foreclose	has been r ration for th ure sale	received from the State Tax Assesso the property is less than \$50,000
11. OATH Awa our kr Granter	owledge and belief, it is	orth by 36 M.R.S. § 4641-K, we true correct, and complete. G	hereby swear or irantee(s) and Gra Grantor	antor(s) 97 their au	ve each exitholized a	amined this return and to the best gent(s) are required to sign below:). Ala/MBate 3 / 13
Granted 12. PREPARER Name		Date	Grantor	r		Date

Portland, ME 04103 http://www.maine.gov/revenue/propertytax/transfertax/transfertax.htm Rev. 12/15

Mailing Address

813 Washington Avenue

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840023555

Registry	Sagadahoc
Date Recorded	03/28/2018
Time Recorded	11:33:00 AM
Fransfer Tax Amount	\$743.60
Document Number	2018r-02006
	2018
Page	2006

RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641						Time Recorded 11:33:00 AM					
						Tran	sfer Tax	Amount _	\$743.60		
Sagadaho	С					D	ocument	Number	2018r-0200	06	
1. County						4		Book 2	2018		
BATH				Ĭ,				_			
2. Municipality	/Township						2004	Page _			
3. GRANTEE/							BOOK	PAGE—REGIS	TRY USE ONLY		
PURCHASER	LARRABEE 3a) Name (LAST)		ALLEN (FIRST)			(MI)	3b) SSN or Federal	ID		
	3c) Name (LAST)		(FIRST)			(MI)	34) SSN or Federal	ID.		
	81 BEACON	STREET					34	, 33,10,17 cacial			
	BATH 3f) City							ME 3g) State	04530 3h) Zip Code		
4. GRANTOR/				·				<i>39, 31010</i>	311) Zip Code		
SELLER	CLEGG 4a) Name (LAST)		SEAN (FIRST)			R.	45) SSN or Federal	ID		
							40) 33N of Federal	טו		
	CLEGG 4c) Name (LAST)		ANGELA (FIRST)			C.) SSN or Federal	ID		
	81 BEACON	STREET			· · · ·	7	70,) 5514 Of Tederal	10		
	4e) Mailing Address	DITUELI				_					
	BATH							ME	04530		
	4f) City							4g) State		de	
5. PROPERTY	20 5a) Map 81 BEACON 5c) Physical Location	Block STREET	176 Lot	Sub-Lot	describ Check a		ty being sol y: exist els cel	code number tl d. (See instruction 0.37			
6. TRANSFER TA	X 6a) Purchase P	rice (If the transt	fer is a gift, enter "	O")		6a	\$168,9	900		.00	
		Value (enter a v	ralue only if you e		sa) or	6b	Ψ100,.			00.	
	,						_] .00	
7 DATE OF TRA	oc) Exemption (the box if either gra								
03 MONTH	27 2018 DAY YEAR		stantial financial pe							use.	
9. SPECIAL CIRC in the transfer w	CUMSTANCES—Were the hich suggest that the paket value? If yes, check to	rice paid was eith	er more or less	10. INCC	OME TAX V	X Seller has	income ta qualified has been r ation for th	x because: as a Maine res eceived from	withhold Maine sident the State Tax As less than \$50,00	sessor	
11. OATH			T itle 36 §4641-K, we			nat we have	each exan				
	our knowledge and		•					•			
	ANCEL	. CLEGG A C. CLEGG	Date 03/2			LLEN LA	KKABE	E	Date 03/28/	/2018	
12. PREPARER	Grantee	AMY GIBSON	Date	2012010 Gra	antor	NI 1	(207) 49	2 7672	Date 03/28/	2016	
HEL ANEI	Name of Preparer	2320 CONGRES	SS STREET	ERLIN ER		ne Number . ail Address					
	Mailing Address .	PORTLAND, M				ali Address Number	J wy 611				

PROCESSED Γ

DLN: 1001840023692

O_{N}	IT INIC	MAIN	E REVENUE SER	VICES		R	egistry.	Sagadanoc	
ONLINE.			STATE TRANSFI	ER TAX		Date Re	corded	03/29/2018))
	RE-PROCESS		DECLARATION			Time Re	corded	09:22:00 A	M
KE	TTD	TITLE 36, M.	R.S.A. SECTIONS §§4	1641-4641N	Tran	sfer Tax A	- Amount	\$429.00	
Sagadaho	oc				D	ocument N	- Jumber	2018r-0202	29
1. County							Book		
BATH							-		
2. Municipality	/Township					DOOK/D	Page		
3. GRANTEE/						BOUNT	IGEKEGI	STRY USE ONLY	
PURCHASER	KEVCO COI 3a) Name (LAST)	NSTRUCTION (FIRST	Γ)		(MI)	3b) S	SN or Federa	al ID	
	3c) Name (LAST)	(FIRST	-)		(MI)	3d) S	SN or Federa	al ID	
	1 TWILIGHT	ΓTRAIL							
	GRAY						ME	04039	
	3f) City						3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	BANK OF A	MERICA (FIRST	¯)		(MI)	4b) S	SN or Federa	al ID	
	4c) Name (LAST)	(FIRST	r)		(MI)	4d) S	SN or Federa	al ID	
	1600 S. DOU	GLASS RD. SU	ITE # 130A						
	4e) Mailing Address								
	ANAHEIM						CA	92806	
	4f) City						4g) Sta	te 4h) Zip Co	de
5. PROPERTY	25 5a) Map		07	describ		/—Enter the co ty being sold . y:			
	14 COBB RC	OAD, BATH, MI	E 04530		o tax maps e ultiple parce ortion of par	els cel	0.07		
6. TRANSFER TA	\V	vias (If the stress story is a	:ftt#0#\		6 -				.00
		rice (If the transfer is a		":- (-)	6a	\$97,200	,] .00
		ominal value)	only if you entered "0"	in 6a) or	6b				.00
	6c) Exemption o	claim – 🔲 Check the b	ox if either grantor or gra	antee is claimin	g exemption	n from trans	fer tax and	explain.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY) 8. WARNING TO	BUYER-If the property is	classified as Fa	rmland, Ope	en Space, Tre	ee Growth.	or Working Wate	r-
02	28 2018	_	al financial penalty could					-	use.
MONTH 9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were th	ere any special circumst	tances 10.	INCOME TAX W	/ITHHELD-	Buver(s) not	required t	o withhold Maine	
in the transfer w	which suggest that the p	rice paid was either mo		_	_	income tax	because:		-
than its fair mar	ket value? If yes, check t	ne box and explain:		-		s qualified as has been red		esident n the State Tax As	sessor
					_	ation for the		s less than \$50,00	
11. OATH			6 §4641-K, we hereby sw						
	DANDZ A	belief, it is true, correct, OF AMERICA	and complete. Grantee(s Date 03/29/2018	**		thorized age ONSTRU		equired to sign be Date03/29/	
	Grantee BANK Grantee		Date 03/29/2018 Date 03/29/2018	Grantor K	<u> </u>	0110110	211011	Date03/29/ Date03/29/	
12. PREPARER	Name of Preparer	CARROLL OWEN	_ Date		ne Number.	(469) 344-	4483	_ Date	<u> </u>
	Mailing Address	6200 TENNYSON PK	WY., STE. #110		_			ngtontss.com	
		PLEASANT ISLAND			Number				

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840023920

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	03/30/2018
Time Recorded	01:23:00 PM
Transfer Tax Amount	\$523.60
Document Number	2018r-02086
Book	2018
Page	2086

DE'	ΓTD	TITLE 36, M.R.S.A. SECTIONS §§	1611 16111	Ti	me Recorded	01:23:00 P	<u>M</u>
- NE	110		4041-4041N	Transfer	Tax Amount	\$523.60	
Sagadaho	c			Docu	ment Number	2018r-0208	36
1. County	· · · · · · · · · · · · · · · · · · ·				Book	2018	
BATH						2086	
2. Municipality	/Township			R	•	GISTRY USE ONLY	
3. GRANTEE/ PURCHASER			L	-			
	REED 3a) Name (LAST)	FRANKLIN (FIRST)		J (MI)	3b) SSN or Fed	eral ID	
	REED	LAURIE		I			
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Fed	eral ID	
	221 HOPEWELL	RD.					
	3e) Mailing Address			ı			—
	COLLEGEVILLE	3			PA	19426	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	
SELLER	FLOYD 4a) Name (LAST)	CHRISTOPHER (FIRST)		L (MI)	4b) SSN or Fed	eral ID	
	FLOYD	MARY ALICE		M	15,551.61.45		
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Fed	eral ID	
	515 DANUBE A	VE.					
	4e) Mailing Address TAMPA				E	22606	\neg
	4f) City				FL 4g) S	33606 4h) Zip Co	de
5. PROPERTY	05	013			iter the code numb		
	5a) Map Blo		——— Check any	that apply:	ing sold , (See instit	201	
	2 GOOSE COVE	RD	1	tax maps exist tiple parcels	0.00		
	5c) Physical Location	10.	Port	ion of parcel	5d) Acreage		
6. TRANSFER TA	X 6a) Purchase Price (I	f the transfer is a gift, enter "0")		6a \$1	19,000		.00
		e (enter a value only if you entered "0)" in 6a) or	H]]
	if 6a) was of nomina	l value)		6b			00.
	6c) Exemption claim –	Check the box if either grantor or gr	rantee is claiming	exemption fro	m transfer tax ar	d explain.	
	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER —If the property i front a substantial financial penalty could					
MONTH	27 2018 YEAR	mone a substantial infancial penalty cour	a be inggerea by	development,	30001V131011, par		
9. SPECIAL CIRC	UMSTANCES—Were there an		INCOME TAX WI			to withhold Main	e
	hich suggest that the price pa ket value? If yes, check the bo				me tax because: ilified as a Maine		
	•	. Ц				om the State Tax As	sessor
				Consideration Foreclosure S		y is less than \$50,00	00
11. OATH	Aware of penalties as se	et forth by Title 36 §4641-K, we hereby sv	wear or affirm tha			eturn and to the h	est of
	our knowledge and belief,	it is true, correct, and complete. Grantee((s) and Grantor(s)	or their author	ized agent(s) are	required to sign b	elow:
	Grantee CHRISTOPH Grantee MARY ALIC		Grantor FR	ANKLIN JE	REED ED	Date 04/02 Date 04/02	/2018 /2019
12. PREPARER	Grantee	NDA BIENVENUE	Grantor LA	Number(60		Date	2010
	Maille of FlepaterWA.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	rnone	: Number	JU , UM & 1JJJ		

Mailing Address

70 MARKET ST MANCHESTER, NH 03101 E-Mail Address <u>wbienvenue@mssg.com</u>

Merits: 0011838937737 Trips: 8181140690075



MAINE REVENUE SERVICES

	ZRETID*		DECLARA				201	8 —) W	τ ()	
1. County	TTD	lun	E 36, M.R.S.A. SECTIO	NS 554641-4	641N		•		_		
SAGADA	HOC					_		<u>:/30/2018-0</u> 018R-0			
2. Municipality	·							nsfer Tax of			
BATH	Township			*	-			e of Maine Tr ADAHOC COU			
DUTII	· · · · · · · · · · · · · · · · · · ·										
3. GRANTEE/ PURCHASER	30) Name LAST or BUSI HERNANDE	NESS, FIRST, MI Z, KAN	RON L.				BOOK/P	'AGE—REGIST	ry USE	ONLY	
	HERNANDEZ, JOHN D.										
	3e) Mailing Address I GRAFFAM WAY 3f) City							3g) State	_3h) <u>Z</u> i	p Code	
	BATH							ME	04:	350	
4. GRANTOR/ SELLER	4a) Name, LAST or BUS		D.								
	4cl Name LAST or BUS GOULD, E										
	4e) Mailing Address 15 WEEKS	STREE	T	-				j			
	4f) City	******						4g) State	4h) Zip Cod	e
	BATH		WATER BUILDING					ME	04	530	
5. PROPERTY	5a) Map 33	Block	Lot 75	Sub-Lot	describes t heck any t	the property that apply:	being sold	ode number the See instruction		202	
	5c) Physical Location 15 WEEKS	STREET	1		Multi	ax maps exi iple parcels on of parce		l) Acreage			7
6. TRANSFER TA	X			······································	1 1.010		<u> </u>	<u> </u>	4 E (·	
			ansfer is a gift, enter "0'	•	A. 10	6a [45(000	.00.
6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6b											.00
	6c) Exemption	claim – Cl	neck the box if either gran	tor or grantee is	claiming e	xemption f	rom trans	fer tax and ex	plain.		
	· · · · · · · · · · · · · · · · · · ·					- 					J
7. DATE OF TRA 03-30 MONTH	NSFER (MM-DD-YYY) -2018 DAY YEAR		NING TO BUYER-If the properties of the propertie						orcha		se.
in the transfer w	UMSTANCES—Were t hich suggest that the set value? If yes, check	price paid was	either more or less	10. INCOMI		in Seller has q	come tax ualified a	s a Maine resi	dent		
					، لِيَ		on for the	ceived from tle property is le			
11. OATH	our knowledge and		by Title 36 §4641-K, we he, correct, and complete.	rantee(s) and G	rantor(s) o						
	Grantee /////	-11 VIVA	Date 0/3/3	<u>名別</u> Granto タイろ Granto		2	Hon	10	Date Date	<u> カ/30</u> ろ120	118
12. PREPARER	Name of Preparer	Jessica R. Avery	Dates	Gianto	Phone l	Number 20	7-442-8781		Date _		147
	Mailing Address	280 Front Stre	et, Bath, ME 04530				a@sals-la	w.com			
	-				Fax Nu	mber			, ,		