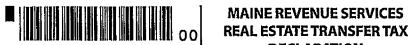
Merits: 0011747671022 Trips: 9171430940045



1	L2RETTD		DECLARATION		11.	31/7	11-11	7 A 11
RE'	TTD	361	VI.R.S. §§ 4641-464	1N				
1. County						2017F	1-02/	73
SAGADA	HOC					Trans Itate of Ma	for Tax of	far Tax
2. Municipality,	/Township		*	_	SA	GADAHO	COUNTY	MAINE
BATH			-			201	7-21	ל3)
3. GRANTEE/				44. 41		BOOK/PAGE-	REGISTRY US	E ONLY
PURCHASER	3a) Name LAST or BUSINES VIADUCT,	S, FIRST, MI LLC			\$-100 A			
	3c) Name, LAST or BUSINES	· · · · · · · · · · · · · · · · · · ·				:		
	3e) Mailing Address after p PO BOX 37	O O		 	*	,,-		
	WOOLWICH						ME 04	4579
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINE VIADUCT,	ss, first, mi LLC		2				
	4c) Name LAST or BUSINE	SS. EIRST. MI		7				
			·		· · · · · · · · · · · · · · · · · · ·	ŀ		
	4e) Mailing Address	ń			· · · · · · · · · · · · · · · · · · ·			
	PO BOX 37	<u>U</u>			Ţ			
	4f) City			· · · · · · · · · · · · · · · · · · ·				4h) ZIP Code 4579
	BATH			 			ME 10	4019
5. PROPERTY	5a) Map	Block	Lot Sub-Lot		 b) Type of property escribes the propert 			
	27		175		ck any that apply	<i>;</i> :		<u> </u>
	5c) Physical Location 7	Lots 176,1	18		No tax maps e Multiple parce		eage 	
	2&10 FRANK	LIN ST;7	35 MIDDLE	ST	Portion of pare			
6. TRANSFER TA	AX ба) Purchase Pri	ce (If the transfer is	a gift, enter "0")		6a			00.0
	6b) Fair Market \ If 6a) was of nor		e only if you entered "	0"in 6a) or	6b	<u> </u>	400	00.000
	6c) Exemption cla	alm – 🕢 Check the	box if either grantor or g	rantee is cla	ı iming exemptioi	n from transfer t	ax and explain	1.
TItle 36 M	RS S 4641-c(3): DE	ED AFFECTING A	PREVIOUS DEED WI	THOUT CH	ANGING OWNER	SHIP		
7. DATE OF TR	ANSFER (MM-DD-YYYY)	8. WARNING TO	BUYER-If the property	is classified	as Farmland, Op	en Space, Tree G	rowth, or Wor	king Water-
	9-2017	front a substan	tial financial penalty cou	ld be trigge	red by developm	ent, subdivisio	ı, partition or o	change in use. CLASSIFIED
MONTH 9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were the	re any special circum	stances (**) 10	. INCOMET	AX WITHHELD-	Buver(s) not rec	ruired to with	
in the transfer v	which suggest that the pr	ice paid was either m				income tax bec	ause:	
trian its rair mai	rket value? If yes, check th	ie nox and explain:		1	<u> </u>	qualified as a N has been receiv		ate Tax Assessor
ì	•			•	- T	ation for the pro		
					Foreclosu			
11. OATH	Aware of penalties our knowledge and b	as set forth by 36 Modellef, it is true, correc	.R.S. § 4641-K, we hereb t, and complete. Grantee	y swear or a e(s) and Gran	offirm that we have ntor(s) of their au	ve each examin thorized agenti	ed this return a (s) are required	and to the best o I to sign below:
	Grantee		_ Date 3 27 201				Date	<u>8/29/2017</u>
	Grantee		Date	Grantor	V		Date	, 11
12. PREPARER	Name of Preparer	enny Burch			Phone Number.	207.443.3333	Osmall same	
	Mailing Address	3 Centre Street			Citali Nacices	jennyburch207	шgman.com	₁
	Ŀ	Bath, ME 04530			Fax Number	207.443.3333		

DLN: 1001740013121

Registry	Sagadahoc
Date Recorded	04/03/2017
Time Recorded	03:05:00 PM
Transfer Tax Amount	\$1,025.20
Document Number	
	2017

<u>RE</u>	TTD	TITLE 3	6, M.R.S.A. SEC	TIONS §§4	1641-46	41N	nafor Tax	Amount	\$1,025.20	
Sagadaho	oc									
1. County							Ocumen	Number	2017r-021	91
BATH								Book	2017	
2. Municipality	/Township							Page	2191	
3. GRANTEE/	•						воок	/PAGEREG	ISTRY USE ONLY	,
PURCHASER	GEEHAN		NANCY			<u></u>			<u>. </u>	
	3a) Name (LAST)		(FIRST)			(MI) <u>3k</u>) SSN or Feder	al ID	
	3c) Name (LAST)		(FIRST)	·············		(MI)	36) SSN or Feder	al ID	
	PO BOX 5 3e) Mailing Address									
	SEDGEICK		·		_		1	ME	04676	1
	3f) City	-						ME 3g) State	3h) Zip Cod	
4. GRANTOR/	SAUFLER		CHARLES			J				
SELLER	4a) Name (LAST)		(FIRST)			J (MI)) 4b) SSN or Feder	al ID	
	SAUFLER		BETH			A				
	4c) Name (LAST)		(FIRST)			(MI)	4d) SSN or Feder	al ID	
	17 JEWETT	ROAD								
	4e) Mailing Address								-	
	GEORGETC 4f) City)WN						ME	04538	
5. PROPERTY					1 5	b) Type of proper	v—Enter the	4g) Sta	 	ode
	32 5a) Map	Block	79		d	escribes the prope eck any that app	rty being sol			
			Lot	Sub-Lot	—[No tax maps	exist			-
	2 MAXWEL	L STREET			-	Multiple pard Portion of pa	rcel ^I	0.25		
6. TRANSFER TA	5c) Physical Location X					<u> </u>		id) Acreage		
		Price (If the transf	-			6а	\$233,	000		.00
	6b) Fair Marke if 6a) was of n	t Value (enter a v ominal value)	alue only if you	entered "0"	in 6a) or	6b				.00
	,		the how if either m					<i>.</i>		00
	oc/ Exemption	claim Check	tile box il eluler g	rantor or gra	ntee is cia	ilming exemptio	n from traf	ister tax and	explain.	
7 DATE OF TRA	NICEEN (MANA DE VOICE	() 0 1110 551115								
03	31 2017	front a sub	GTO BUYER-If the stantial financial p	e property is enalty could	classified be trigge	as Farmland, Op red by developn	en Space, nent, subdi	free Growth, vision, partit	or Working Wat ion or change ir	er- n use.
MONTH	DAY YEAR								CLASS	SIFIED
	UMSTANCES—Were the hich suggest that the p			10. li	NCOME T	AX WITHHELD-	·Buyer(s) n income ta		o withhold Mair	ne
	ket value? If yes, check					X Seller ha		as a Maine re	esident	
									the State Tax A	
						Foreclos		ie property i	s less than \$50,0	J00
11. OATH	Aware of penaltic	es as set forth by T	itle 36 §4641-K, w	e hereby swe	ear or affi	m that we have	each exam	ined this ret	urn and to the I	oest of
	our knowledge and Grantee CHARL	l belief, it is true, co ES J SAUFLEF				ntor(s) or their au NANCY G		gent(s) are re	equired to sign b 	
		SAUFLER		/03/2017	Grantor				Date04/03 Date04/03	3/2017
12. PREPARER	Name of Preparer .	LYNN BILODE				Phone Number	(207) 87	4-0500		
	Mailing Address .	70 CENTER ST				E-Mail Address	_	nclaughlintitl	e.com	
		PORTLAND, M	E 04101			Fax Number				

DLN: 1001740013091

Registry	Sagadahoc
Date Recorded	04/04/2017
Time Recorded	12:09:00 PM
Transfer Tax Amount	\$985.60
Document Number	2017r-02234
Book	2017
Page	2234
DOOK/DACE DEC	ETDY LISE ONLY

RE	TTD	TITLE 36, M.R.S.A.	SECTIONS §§4641-46	41N	Time Recorded	12.09.00 FM
				Tran	sfer Tax Amount	\$985.60
Sagadaho	oc			De	ocument Number	2017r-02234
1. County					Book	2017
BATH						2234
2. Municipality	y/Township				BOOK/PAGE—REG	
3. GRANTEE/ PURCHASER	DRUMMON 3a) Name (LAST)	ND POINT LLC (FIRST)		(MI)	3b) SSN or Feder	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	UD
	1 ROUND I				Suj SSIN Of Feder	aiiD
	PORTSMOU	JTH			NH	03801
4. GRANTOR/					3g) State	3h) Zip Code
SELLER	PARSONS-1 4a) Name (LAST)	MANK CHRIS (FIRST)		L (MI)	4b) SSN or Feder	al ID
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	ral ID
	26 GODFRE	EY COVE RD.			,	
	4e) Mailing Address					
	YORK			,	ME	03909
·	4f) City				4g) Sta	
5. PROPERTY	5a) Map 3 DRUMMC 5c) Physical Location	Block 335 DND POINT, BATH, N	Sub-Lot Che	lescribes the property eck any that apply No tax maps e: Multiple parce Portion of parc	xist ls el 0.36	tions)—» 202
6. TRANSFER TA	AX			<u> </u>	5d) Acreage	
	6b) Fair Marke if 6a) was of n	Price (If the transfer is a gift, e et Value (enter a value only if ominal value) claim – Check the box if eith	you entered "0" in 6a) or	6b	\$224,000	.0 explain.
7. DATE OF TRA	ANSFER (MM-DD-YYY)	/) 8 WARNING TO BLIVED	-If the property is classified	as Farmland One	n Conso Tree County	
03 MONTH	31 2017 DAY YEAR		cial penalty could be trigge	red by developme	ent, subdivision, partit	tion or change in use. CLASSIFIED
9. SPECIAL CIRC in the transfer w	CUMSTANCES—Were t	here any special circumstances price paid was either more or less the box and explain:	10. INCOMET	i X Seller has A waiver h	tion for the property i	esident n the State Tax Assesso
11. OATH	Aware of penalti	es as set forth by Title 36 §4641	-K, we hereby swear or affi	rm that we have e	ach examined this ret	turn and to the best of
	our knowledge and	d belief, it is true, correct, and con $ extstyle L PARSONS-MANK Date$	mplete. Grantee(s) and Gran	ntor(s) or their aut	horized agent(s) are re ND POINT LLC	equired to sign below: $Date = \frac{04/04/2017}{2017}$
	Grantee	Date	04/04/2017 Grantor			
12. PREPARER	Name of Preparer .	KAREN BRAZELL			(603) 431-8100 Ext	
	Mailing Address	501 ISLINGTON ST.		E-Mail Address	kbrazell@signaturetit	le.com
	•	YORK, NH 03801		Fax Number _		

Merits: 0011747672033 Trips: 9171430940067



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

415117 1202 PM RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641N 2016R-02251 1. County Transfer Tex of State of Maine Transfer Tex SAGADAHOC 2. Municipality/Township **BAGADAHOC COUNTY MAINE** 2016-2251 BATH BOOK/PAGE-REGISTRY USE ONLY 3. GRANTEE/ **PURCHASER** Name LAST of BUSINESS, FIRST, MI RUDELL, PAUL TRUDELL, Μ. 3c) Name, LAST or BUSINESS, FIRST, MI TRUDELL, ELLEN Μ. 3e) Mailing Address COASTAL PLAZA STATE ROAD, 04530 ME 4a) Name, LAST or BUSINESS, FIRST, MI 4. GRANTOR/ **SELLER** CITY OF BATH 4c) Name LAST or BUSINESS, FIRST, MI 4e) Mailing Address 55 FRONT STREET 4f) City 4h) Zip Code 4g) State BATH ME 04530 5a) Map Block 5. PROPERTY Lot Sub-Lot 5b) Type of property—Enter the code number that best describes the property being sold. (See instructions)-13 28 Check any that apply: No tax maps exist 5d) Acreage 5c) Physical Location Multiple parcels 93 COTTAGE STREET Portion of parcel 6. TRANSFER TAX 00.0 6a) Purchase Price (If the transfer is a gift, enter "0") ба 6b) Fair Market Value (enter a value only if you entered "0" in 6a) or 143200.00 if 6a) was of nominal value) 6b 6c) Exemption claim - 🗸 Check the box if either grantor or grantee is claiming exemption from transfer tax and explain. DEED FROM MUNICIPALITY BACK TO DELINQUENT TAXPAYER. 7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the property is classified as Farmland, Open Space, Tree Growth, or Working Waterfront a substantial financial penalty could be triggered by development, subdivision, partition or change in use. 3-30-2017 __ CLASSIFIED 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances 10. INCOME TAX WITHHELD-Buyer(s) not required to withhold Maine in the transfer which suggest that the price paid was either more or less income tax because: than its fair market value? If yes, check the box and explain: ✓ Seller has qualified as a Maine resident A walver has been received from the State Tax Assessor DEED FROM MUNICIPALITY Consideration for the property is less than \$50,000 BACK TO DELINQUENT TAXPAYER. Foreclosure Sale 11. OATH Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear or affirm that we have each examined this return and to the best of de/correct, and complete. Grantee(s) and Grantor(s) or their althorized agent(s) are required to sign below: Grantee Grantor Grantee Grantor Date Phone Number (207) 443-5182 12. PREPARER ROGER R. THERRIAULT, ESQ. Name of Preparer 48 FRONT STREET, BATH, ME 04530 rtherriault@tlawmaine.com Mailing Address E-Mail Address http://www.maine.gov/revenue/propertytax/transfertax/transfertax.htm

Merits: 0011747671329 Trips: 9171430940059



RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§4641	I-4641N	04/05/2017 12:47 PM
1. County				2017R-02262
Sagadaho	C			Transfer Tax of 836,00 State of Maine Transfer Tax
2. Municipality	//Township			SAGADAHOC COUNTY MAINE
Bath		CONTROL OF THE CONTRO		2017-2262
3. GRANTEE/			<u> </u>	BOOK/PAGE—REGISTRY USE ONLY
PURCHASER	3a) Name LAST or BUSI	NESS, FIRST, MI	<u> </u>	·
	RODGERS_	ADAM	D.	
	3c) Name, I AST or RUSI	•		1
	BERARD ,3e) Mailing Address	RYAN	A.;	1
	374 LISBON	ST., APT. 3		-
	3f) City		****	3g) State3h) Zip Code
4 601115004	LISBON	Was allowed		ME 04250
4. GRANTOR/ SELLER	4a) Name, LAST or BUS ASAMCO, LL			i
	4c) Name, LAST or BUS	+		I
	1	1,1-1-10 to 1,1-10 to 1,1-		1
	4e) Mailing Address		· ·	•
	1 RACKLIFF	E RIDGE	- • • • • • •	
	4f) City		-	4g) State 4h) Zip Code
	TOPSHAM		-	1
 	_			ME 04086
5. PROPERTY	5a) Map	Block Lot Sub-Lot	5b) Type of property— describes the property b	Enter the code number that best peing sold. (See instructions)—»
	21		Check any that apply:	f
	5c) Physical Location		No tax maps exis Multiple parcels	st 5d) Acreage
	87 Dummer Str	eet	Portion of parcel	
6. TRANSFERT	AX 60) Burchasol	Price (If the transfer is a gift, enter "0")		· · · · · · · · · · · · · · · · · · ·
		7 .	ба	\$ 190,000.00
	if 6a) was of n	et Value (enter a value only if you entered "0" in 6 ominal value)	a) or 6b	,
	6c) Exemption	claim – Check the box if either grantor or grantee	is claiming exemption fi	om transfer tax and explain.
		•		
7. DATE OF TR	ANSFER (MM-DD-YYY	8. WARNING TO BUYER-If the property is class	sified as Farmland, Open	Space, Tree Growth, or Working Water-
04	03 2017	front a substantial financial penalty could be t	riggered by developmen	t, subdivision, partition or change in use.
MONTH	DAY YEAR			CLASSIFIED
		here any special circumstances 10. INCO price paid was either more or less		yer(s) not required to withhold Maine come tax because:
	rket value? If yes, check			ualified as a Maine resident
				s been received from the State Tax Assessor
			Consideration Foreclosure	on for the property is less than \$50,000
11. OATH	Aware of penalt	les as set forth by Title 36 §4641-K, we hereby swear o	<u> </u>	
	our knowledge an	d belief, it is true, correct, and complete. Grantee(s) and	Grantor(s) of their author	prized agent(s) are required to sign below:
	Grantee ///	May Date 43.17 Gra	inter	14611/ Date 4/3/17
40 Barra	Grantee V/V/	///	intor AA	Date 4/3/19
12. PREPARER	Name of Preparer	H&D Title & Closing Services, LLC	7 107 107	207)376-0631
	Mailing Address	181 Center Street, Suite 2, Auburn, ME 04210	v	cortes@hdtitle.com
		http://www.maine.gov/revenue/propertytax/tra		207)782-7800
SPR		····hattatamines Anthereunethicher Arayina	c. mvi naitsigi rayiliti	ii '

PROCESSED ONLINE

DLN: <u>10017400</u>13183

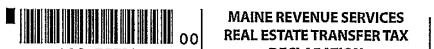
MAINE REVENUE SERVICES

Registry	Sagadahoc
Date Recorded	04/07/2017
Time Recorded	11:21:00 AM
Fransfer Tax Amount	\$0.00
Document Number	2017r-02306
Book	2017
D	2306

	RE-PROCESS		E TRANSFER T	'AX		Date F	Recorded _	04/07	<u>7/2017</u>	'
		7	ARATION			Time F	Recorded	11:21	l:00 A	<u>M</u>
KE	ΓTD	TITLE 36, M.R.S.A. S	ECTIONS §§4641	-4641N	Tran	sfer Tax	Amount	\$0.00)	
Sagadaho	С				De	ocument	Number	2017	r-023(———)6
1. County							Book	2017		
BATH							Page			
2. Municipality	Township					BOOK/	_ PAGE—REGI			
3. GRANTEE/ PURCHASER	AUCLIFF, LI	C (FIRST)		L	(MI)		SSN or Federa			
	3c) Name (LAST)	(FIRST)			(MI)	3d)	SSN or Federa	al ID		
		IA J. TAGGART, P.C). BOX 205							
	3e) Mailing Address BATH						ME		4530	
	3f) City						ME 3g) State		Zip Code	
4. GRANTOR/ SELLER	TAGGART 4a) Name (LAST)	PATRIC (FIRST)	IA		Ј (МІ)	4b)	I SSN or Federa	al ID		
	4c) Name (LAST) P.O. BOX 205 4e) Mailing Address	(FIRST)			(MI)	4d)	SSN or Federa	ai ID		
	BATH 4f) City						ME 4g) Star		4530 4h) Zip Cod	de
5. PROPERTY	U17	000 3					code number i d. (See instructi		205	==
	5a) Map	Block Lot	Sub-Lot	Check any	that apply	ý:	a. (See marrace	10113) "	203	
	814 FOSTERS	S POINT RD		Mul	ax maps e tiple parce	els	0.86] .	
	5c) Physical Location			Port Port	on of pare	cel 5	id) Acreage		_	
6. TRANSFER TA	X 6a) Purchase Pri	ice (If the transfer is a gift, er	nter "0")		ба	\$0				.00
	6b) Fair Market ' if 6a) was of nor	Value (enter a value only if ₎ minal value)	ou entered "0" in 6a	a) or	6b	\$555,7	700			.00
	6c) Exemption cla	X im – X Check the box if eith	ner grantor or grantee	is claiming	L exemption	from tran	sfer tay and	evolain		,
DEED IN		JANT TO TITLE 36 I					isier tax and	ехрівії.		
7. DATE OF TRA	NSFER (MM-DD-YYYY) 06 2017 DAY YEAR	8. WARNING TO BUYER— front a substantial financ								use.
in the transfer w than its fair mark	hich suggest that the pri ket value? If yes, check th	<u> </u>		X	Seller has A waiver l	income ta qualified has been re	ot required to x because: as a Maine re eceived from	esident o the Sta	te Tax As	sessor
		JANT TO TITLE 36 I			Foreciosu	ire Sale	ne property is			
11. OATH	our knowledge and k	is as set forth by Title 36 $\$$ 4641- pelief, it is true, correct, and com $A\ J\ TAGGART$	nplete. Grantee(s) and	Grantor(s)	or their au	thorized a		equired 1	to sign be	elow:
		Dute	$\frac{04/10/2017}{04/10/2017}$ Gran	ntor AU	CLIFF,	LLC			04/10/	
12. PREPARER	Grantee Name of Preparer	LINDA PORTER	Gran		Number_	(207) 77	2-5845 Ext	_ Date	5 10/	
	Mailing Address	6 CITY CENTER, SUITE 400			Address		hablaw.com			
	maining nucless =									_

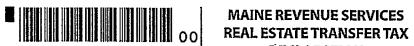
PORTLAND, ME 04101 Fax Number

Merits: 0011747672839 Trips: 9171430940079



	L2RETTD*	DECLARATION	4	+ 1712017 /1:29 AM
RE'	TTD	TITLE 36, M.R.S.A. SECTIONS §§464	11-4641N	41712017 11:29 AM
1. County	·	Administration (alternations)		Transfer Tax of
SAGADA	HOC			State of Maine Transfer Tax
2. Municipality	/Township			SAGADAHOC COUNTY MAINE
BATH			····	2017-2309
3. GRANTEE/				BOOK/PAGE—REGISTRY USE ONLY
PURCHASER	3a) Name LAST or BUSINESS, FIRST	T.MI	<u> </u>	
	3c).Name.LAST or BUSINESS. FIRS			
	3e) Mailing Address 40 SUMMER ST	ĸĸĸ.		
	3f) City			3g) State 3m/2/p.coge ME 04530
	BATH			ME 04530
4. GRANTOR/ SELLER	4a) Name LAST of BUSINESS, FIRE	ST, MI		· ·
	4c) Name LAST or BUSINESS, FIRS			
			·	
	4e) Mailing Address	No. 1 and 1		
	55 FRONT STI	REET		
	4n City BATH			4g) State 4h) Zip Code
	BATH			ME 04530
5. PROPERTY	5a) Map Bloc			rty—Enter the code number that best erty being sold. (See instructions)—>
	26	218	Check any that app	ply:
•	5c) Physical Location		No tax maps Multiple par	
	SUMMER STREE	T, BATH, ME	Portion of pa	· I
6. TRANSFER TA	AX ба) Purchase Price (If	the transfer is a gift, enter "0")	ба	0.00
*	6b) Fair Market Value if 6a) was of nominal	(enter a value only if you entered "0" in value)	6a) or 6b	0 0
	6c) Exemption claim –	Check the box if either grantor or grant	ee is claiming exempti	ion from transfer tax and explain.
DEED FROM G	OVERNMENTAL ENTITY TO	ESTABLISH COMMON BOUNDARY.		
7. DATE OF TRA	ANSFER (MM-DD-YYYY)	B. WARNING TO BUYER-If the property is cla		
<u> </u>		front a substantial financial penalty could be	triggered by develop	ment, subdivision, partition or change in use. CLASSIFIED
	DAY YEAR CUMSTANCES—Were there any		OMETAX WITHHELD	- Buyer(s) not required to withhold Maine
in the transfer w than its fair mar	vhich suggest that the price pai ket value? If yes, check the box	d was either more or less	5 -2	income tax because: as qualified as a Maine resident
	DEED TO ESTABLISH CO		; 	er has been received from the State Tax Assessor
		MICH DOUBLALL,		eration for the property is less than \$50,000
11. OATH	Aware of populties as set	forth by Title 36 64641-V we hereby sweet	- American	sure Sale e each examined this return and to the best of
	our knowledge and belief, j	t is grue, correct, and complete. Grantee(s) a	nd Grantor(s) or their a	uthorized agent(s) are required to sign below:
	Grantee ! Novor	Date 3 20-11 G	rantor	Date 3 -20-11
12. PREPARER	Grantee ROGER I		rantor	Date 207-443-5182
	Name of Preparer	NT ST., BATH, ME 04530	Phone Number E-Mail Address	thoriouli@tlowmoinc.com
	maning FMUICES	· · · · · · · · · · · · · · · · · · ·	Fax Number	
	http	://www.maine.gov/revenue/propertytax/t		x.htm

Merits: 0011747672438 Trips: 9171430940077



* 1	.2RETTD*		LARATION SECTIONS 884	1641-4641N	41	112017 /1	:29 AM
1. County		THEE DO, WINGS, TO	. 256 (1011)	1041-404114	1 ' :	2017 R- 0	2310
SAGADA	HOC	and the same of th				Transfer T	ax of O,OL
2. Municipality	/Township				St	ate of Maine T SADAHOC CO	LUIDIGI IGV
BATH					SAC		-2310
3. GRANTEE/	<u>.,</u>			1	В	OOK/PAGE—REGISTI	_
PURCHASER	3a) Name LAST or BUSINESS WRIGHT, DC 3ci Name, LAST or BUSINESS 3a) Mai ing Address 42 SUMMER 3f) City	NALD K.					_sn)4l <u>p√ode</u>
	BATH					ME	04530
4. GRANTOR/ SELLER	49) Name, LAST or BUSINESS CITY OF BA 40) Name, LAST or BUSINESS 46) Mailing Address 55 FRONT S	TH EIRST, MI					
	4f) City BATH				-	4g) State	4h) Zip Code 0 4 5 3 0
5. PROPERTY	26 5c) Physical Location SUMMER STRI		Sub-Lot ME	descrii Check a		ter the code number thang sold. (See Instruction Sd) Acreage	
6. TRANSFER TA	X 6a) Purchase Price	(If the transfer is a gift,	ontor"O"\	1:1	ба		0.00
		lue (enter a value only i	=	in 6a) or	6b	The state of the s	00. 0
	6c) Exemption clair	n – 🚺 Check the box if e	ither grantor or gra	antee is claimir	ng exemption fro	m transfer tax and ex	plain.
DEED FROM G	OVERNMENTAL ENTITY	TO ESTABLISH COMMO	ON BOUNDARY.				
	NSFER (MM-DD-YYYY) 0-2017 DAY YEAR	8. WARNING TO BUYER front a substantial final					
in the transfer w	CUMSTANCES—Were there which suggest that the price ket value? If yes, check the	paid was either more or le	ess 🕢 10.	INCOME TAX	inco	er(s) not required to v me tax because: lified as a Maine resi	
	DEED TO ESTABLISH	COMMON BOUNDARY.		Į Į	51	for the property is le	he State Tax Assessor ess than \$50,000
11. OATH	Aware of penalties a our knowledge and be Grantee Grantee	s set forth by Title 36 \$464 ies it is true, correct, and co	e 4-4-17	rear or affirm to and Grantor Grantor Grantor	hat we have each	examined this retur ized agent(s) are requ	n and to the best of uired to sign below: Date 3-20-17 Date
12. PREPARER	***************************************	SER R. THERRIAULT, ESQ.			ne Number ²⁰⁷⁻⁴	43-5182	
	•	RONT ST., BATH, ME 04	530			rriault@tlawmaine.co	m
	-	http://www.maine.gov/re	venue/propertite		Number		
		···· ¹	higherty to		**************************************		

PROCESSED ONLINE.

DLN: 1001740013197

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	04/10/2017
Time Recorded	09:25:00 AM
Transfer Tax Amount	\$479.60
Document Number	
Book	2017
Page	2315
	ICTOVILICE ONLY

	KE-PROCESS		DECLA				Time R	ecorded	09:25	5:00 A	M
RE	TTD	TITLE 3	6, M.R.S.A. SEC	TIONS §§4641-4	641N	Tran	sfer Tax	Amount	\$479	.60	
Sagadaho	c							Number			5
1. County								Book			
BATH									2315		
2. Municipality	/Township						BOOK/E	. Page PAGE—REGI			
3. GRANTEE/ PURCHASER					Į.		БООКТ	AGE—NEGI	כט ואונו	CONLI	
FUNCTIASER	FIELDS		JAMES			M.					
	3a) Name (LAST)		(FIRST)			(MI)	36)	SSN or Feder	al ID		
	FIELDS 3c) Name (LAST)		MICHAEL (FIRST)	,		P.	3d)	SSN or Feder	al ID		
	98 MARGAR	ET STREE]	54,	55.1 5, 7 242.			
	3e) Mailing Address					<u>.</u>			- -		
	SOUTH POR	TLAND						ME	0	1106	
4 CDANITOD!	3f) City							3g) State	3h)	Zip Code	
4. GRANTOR/ SELLER	ROMANO		JOSHUA			R.					
	4a) Name (LAST)		(FIRST)			(MI)	4b)	SSN or Feder	al ID		
	4c) Name (LAST)		(FIRST)			(MI)	1-1	CCN or Forder	-LID		
	488 MIDDLE	STREET	(I III.31)] """	40)	SSN or Feder	aiiD		
	4e) Mailing Address	JIKEET				J					
	BATH							ME	\int_{0}^{∞}	1530	
	4f) City							4g) Sta		4h) Zip Coc	ie e
5. PROPERTY	33		160					code number I. (See instruct		201	
	5a) Map	Block	Lot	Sub-Lot C	heck an	y that appl	y:	•			
	488 MIDDLE	STREET			_	tax maps e Itiple parce		0.06		1	
	5c) Physical Location				Por	tion of par	cel 5	d) Acreage			
6. TRANSFER TA	X 6a) Purchase Pr	rice (If the trans	fer is a gift, ente	r"0")		6a	\$109,0	000			.00
	6b) Fair Market	Value (enter a v	alue only if you	entered "0" in 6a)	or						! !
	if 6a) was of no	minal value)				6b					.00
	6c) Exemption cl	laim – 🔲 Check	र the box if either र्	grantor or grantee is	claiming	exemptio	n from tran	sfer tax and	explain.		
7. DATE OF TRA	NSFER (MM-DD-YYYY)			e property is classific							
04	07 2017	front a suc	istantiai financiai p	penalty could be trig	gered by	<i>i</i> developm	ient, subdiv	vision, partit	tion or ch	nange in i CLASSIF	
MONTH 9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were the	ere any special ci	rcumstances	10. INCOMI	E TAX W	THHELD-	Buyer(s) no	ot required t	o withho		-
in the transfer w	hich suggest that the po ket value? If yes, check t	ice paid was eith	er more or less		_	_	income tax	because:			
than its ian man	Ret value: II yes, check to	ile box and expla					•	as a Maine re eceived fron		te Tax Ass	sessor
					_	Consider	ation for th	e property i			
11. OATH	Awara of non-leia	e ac cot forth but	Ti+lo 36 64641 V .	vo horoby sweet == =	ffirm th	Foreclose		inad this se	turn and	to the b	est of
II. UAITI	our knowledge and	belief, it is true, co	orrect, and comple	ve hereby swear or a ete. Grantee(s) and G					equired 1	to sign be	low:
	Grantee JOSHUA	R. ROMANO		4/10/2017 Granto					_ Date_	04/10/2	2017
42 DDED4055	Grantee	V.3V3.F		4/10/2017 Granto			P. FIELI		_ Date	04/10/2	2017
12. PREPARER	Name of Preparer _	JAN-MARIE C					(207) 321		m		
	Mailing Address _	2320 CONGRE	22 STVEET		. E-Ma	II Address	јалпагле(@titlene.con	11		

PORTLAND, ME 04102 Fax Number http://www.maine.gov/revenue/propertytax/transfertax.htm

Merits: 0011747676301 Trips: 9171430950003



0599900 **RETTD**

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

04/10/2017 12:09 PN 2017R-02356

Transfer Tax of 2153,80 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE

1. COUNTY	DO NOT USE RED INK!				
SAÇADAI	HOC		2017-	2356	
2. MUNICIPALITE	ry/township	BOOI	K/PAGE—REGISTR	Y USE ONLY	
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) IFFLAND, CATHERINE ARENA	<u> </u>			
	3c) Name (LAST, FIRST, MI)	1-1-1-1			
	3e) Mailing Address 20 CROSS STREET, UNIT 2		3g) State	3h) Zip Code	
	WESTPORT	<u> </u>	_ <u>CT</u>	06880	
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) BATH RIVERWALK, LLC	* : * -			
	4c) Name (LAST, FIRST, MI)	<u></u>			
	4e) Mailing Address 40 SOUTH STREET, SUITE 305			·	
	40 Gty MARBLEHEAD		4g) State MA	4h) Zip Code 01945	
5. PROPERTY	26 258	ny that apply:		rty—Enter the code lescribes the property structions)	
	Sc) Physical Location Day H RIVERWALK HNTT 103 (BLDG3) M	lo tax maps exist fultiple parcels ortion of parcel	5d) Acreage:		
6. TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter "0")	·	48	9158.00	
	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 – Check the box if either grantor or grantee is claiming exer	mption from trans	fer tax and explain	า.	
	7. DATE OF TRANSFER (MM-DD-YYYY) 04-07-2017 MONTH DAY YEAR 8. WARNING TO BUYER-If the Tree Growth, a Substantial fire subdivision, partition or charges	inancial penalty co ange in use.	ould be triggered CLASSIFIED	by development,	
which suggest th	nat the price paid was either more or less than its fair market value?	E TAX WITHHELD-	Maine income t		
if yes, check the	es, check the box and explain: Seller has qualified as a Maine resident A waiver has been received from the State Tax Assess:				
	<u> </u>	Consideration for			
31. OATH	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 Grantor(s) of Grantee Any Long Date 4/7/1/ Grantor	t we have each exact heir authorized	agent(s) are requ	and to the best of ired to sign below:	
	Grantee Date Grantor Tax	w Harron	11 14 -	as at Law	
12. PREPARER	Bonnetein Chun	Number 207	-774-1200	6	
	100 Middle Street	Address			
	FOLULANG, ME 04101				

Merits: 0011747673809 Trips: 9171430950019



RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

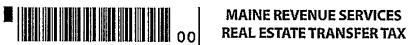
DO NOT USE RED INK!

04/12/2017 10:27 AM 2017R-02423

Transfer Tax of 413.60 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE

1. COUNTY	DO NOT USE RED INK!		_
SĄGĄDĄI	HOC		2017-2423
2. MUNICIPALIT	TY/TOWNSHIP	1	
BATH	<u>, , , , , , , , , , , , , , , , , , , </u>	воок	/PAGE—REGISTRY USE ONLY
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) PURSER, FRANK E.		
	3c) Name (LAST, FIRST, MI) PURSER, MARIE A.	<u> </u>	
	3e) Mailing Address 16 WINDERMERE LANE	1 1 1 1 1 1 1 1	
	SACO		3g) State 3h) Zip Code ME 040,72
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) RUSSELL, CAROLINE K.	<u> </u>	
	4c) Name (LAST, FIRST, MI) JOCHUM, JOHN	<u> </u>	
	4e) Mailing Address 4 LONGLEY COURT		
	4f) Gity TOPSHAM		4g) State 4h) Zip Code ME 04086
5. PROPERTY	Sa) Map Block - Lot Sub-Lot Che	- ck any mat apply:	5b) Type of property—Enter the code number that best describes the property being sold. (See instructions)
	5c) Physical Location 18-20 HEATH LANE	No tax maps exist Multiple parcels Portion of parcel	5d) Acreage:
6.TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter "0")	6a \$	94000
4724	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	6b 💲	n
	6c) Exemption claim – Check the box if either grantor or grantee is claiming	Company in the state of the sta	Ci tan and Capitalis
			sified as Farmland, Open Space or
	Tree Growth, a Substant subdivision, partition or		uld be triggered by development, CLASSIFIED
		OME TAX WITHHELD-	Buyer(s) not required to withhold Maine income tax because:
	hat the price paid was either more or less than its fair market value? box and explain:	Seller has qualifie	
		·	received from the State Tax Assessor
			the property is less than \$50,000
11. OATH	Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm our knowledge and belief Historie, correct, and complete. Grantee(s) and Granto Grantee Date Grantor	that we have each exa	amined this return and to the best of agents are required to sign below:
	Grantee Marie a Current Date 4/7/17 Grantor	My W	Date
12. PREPARER	12 22	Mail Address (20)	7) 729-1667 // @midcoasttitle.com
	DEGISATOR' MP 04011		

Merits: 0011747674820 Trips: 9171430950041



	AND THE PROPERTY OF THE PROPER	DECLARATION		12.1017 12 1/2 A
RET	ΓTD	TITLE 36, M.R.S.A. SECTIONS §§4641-	4641N //	1312017 10:16 A M
1. County				2017 R- 02-475
SAGADAI	HOC			2017 R- 02475 Transfer Tax of 0.00 State of Maine Transfer Tax
2. Municipality/	Township	A CONTRACTOR OF THE CONTRACTOR	SA	GADAHOC COUNTY MAINE
BATH		And the state of t	1	2017-2475
3. GRANTEE/				BOOK/PAGE—REGISTRY USE ONLY
PURCHASER	3a) Name LAST or BUSINESS, FIRS	T, MI		
	SAGADARIOCK 3ci Name, LAST or BUSINESS, FIRS	REAL ESTATE ASSOCIA	TTION	· L
	STISSUE LAST IL BUSINESS, CIN	LL IVII	,	
	3e) Mailing Address			<u>!</u> —
	53 FRONT STI	KERT.		Sgi State <u>Sn) Zip Coge</u>
	BATH			ME 04530
4. GRANTOR/	4a) Name, LAST or BUSINESS, FIR			3
SELLER	INHABITANTS			
	4cl Name LAST of BUSINESS, FIR	T. ML		ī
				l
	4e) Mailing Address 55 FRONT ST	REET		 .
				And Sanar Alba Tio Sanda
	BATH	**		4g) State 4h) Zip Code ME 04530
5. PROPERTY	5a) Map Bloc	k Lot Sub-Lot		nter the code number that best range sold. (See instructions)— 301
	26		Check any that apply:	
	5c) Physical Location		No tax maps exist Multiple parcels	5d) Acreage
	185 FRONT ST	REET	Portion of parcel	
6.TRANSFERTA	X 6a) Purchase Price (If	the transfer is a gift, enter "0")	6a	00. ()
	6b) Fair Market Value if 6a) was of nominal	(enter a value only if you entered "0" in 6a value)	o) or 6b	1000.00
	6c) Exemption claim -	Check the box if either grantor or grantee	ـــــــــــــــــــــــــــــــــــــ	om transfer tax and explain.
Title 36 MR		roperty transferred by a governme		
CHARLES IN THE PROPERTY OF	H H I T 1 WALLSON THE T - 2 T T	8. WARNING TO BUYER-If the property is classi	CANADA AND AND AND AND AND AND AND AND AN	pace, Tree Growth, or Working Water-
04-0	6–2017	front a substantial financial penalty could be tri	iggered by development	
MONTH CIPC	DAY YEAR UMSTANCES—Were there any	amorini diversimentari con 177 10 1817/01	METAVIMITUUEID D	er(s) not required to withhold Maine
in the transfer w	which suggest that the price pai ket value? If yes, check the box	d was either more or less	inco	er(s) not required to withhold Maine ome tax because; alified as a Maine resident
Deed from C	ity of Bath to release	parcel to abutting Grantee	A waiver has	been received from the State Tax Assessor
			Consideratio	n for the property is less than \$50,000 Sale
11.OATH	Aware of penalties as se	forth by Title 36 §4641-K, we hereby swear o	affirm that we have eac	h examined this return and to the best of
	/ 0. 1///	this true, correct, and complete. Grantee(s) and	1.1/1/14	4/6/17
	Grantee (1)	Date Gran		Date
12. PREPARER		AW OFFICE, PA		442,0000
_	Mailing Address P.O. BO	X 662		@legacy-llc.com
	-	Maine 04530		7.442.0003
	http	://www.maine.gov/revenue/propertytax/trai	nsfertax/transfertax.htm	· —

PROCESSED ONLINE.

DLN: 1001740013305

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	04/14/2017
Time Recorded	09:27:00 AM
Γransfer Tax Amount	\$660.00
Document Number	2017r-02501
	2017
75	2501

OO NOT RE-PROCESS. RETTD		DECLARATION TITLE 36, M.R.S.A. SECTIONS §§4641-4641N		.16/1N	Time Recorded			09:27:00 A	AM
		111 EE 30, 141.11.3.7	1. JECTIONS 334041	404111	Tran	sfer Tax	Amount	\$660.00	
Sagadaho	c				D	ocument	Number	2017r-025	01
1. County							Book	2017	
BATH							Page.		
2. Municipality	/Township					BOOK/I	٠.	STRY USE ONLY	
3. GRANTEE/ PURCHASER	RUSSELL 3a) Name (LAST)	FELIC	CIA	L	E (MI)	3b)	SSN or Federa	al ID	
	RUSSELL 3c) Name (LAST)	SAMU (FIRST)	JEL		C (MI)	24/	CCN F-d	-UD	
	50 CORLISS STR		<u></u>		(1411)	30)	SSN or Federa	ai iu	
	3e) Mailing Address					····-			
	BATH						ME	04530	
	3f) City						3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	HART 4a) Name (LAST)	RICHA (FIRST)	ARD		F (MI)	4b)	SSN or Federa	al ID	
	HART 4c) Name (LAST)	CATH (FIRST)	ERINE		R (MI)	4d)	SSN or Federa	al ID	
	64 WOODLANDS	S POINT ROA	D						
	4e) Mailing Address							_	
	WEST BATH						ME	04530	
	4f) City					'	4g) Sta	te 4h) Zip C	ode
5. PROPERTY	33 5a) Map Bloc	88 Lot	Sub-Lot	describes t Check any t	he proper hat appl	ty being solo y:	code number I. (See instruct		
	50 CORLISS STR	FFT			x maps e		0.21		
	5c) Physical Location	LLLI		· —	on of par	_{cel} L	d) Acreage		
6. TRANSFER TA	X 6a) Purchase Price (If	the transfer is a gift	;, enter "0")		ба	\$150,0	· · · · · · · · · · · · · · · · · · ·		.00
		-	if you entered "0" in 6a) or		· ,	·		」 ┐
	if 6a) was of nominal	value)			6b	· · ·			00
	6c) Exemption claim –	Check the box if	either grantor or grantee i	s claiming e	xemptio	n from tran	sfer tax and	explain.	
04			R–If the property is classifuncial penalty could be tri						use.
MONTH 9 SPECIAL CIRC	DAY YEAR CUMSTANCES—Were there any	special circumstance	. 10 INCON	JE TAY WITI	HHEI D.	Ruyar(s) na	t required t	o withhold Mair	
in the transfer w	which suggest that the price pai ket value? If yes, check the box	d was either more or l			Seller has A waiver l	income tax qualified a has been re ation for th	because: as a Maine re eceived from		ssessor
11. OATH	Aware of penalties as ser								
	our knowledge and belief, i GranteeRICHARD F F			Grantor(s) or tor <u>FEL</u> 1				equired to sign t Date04/18	
	Grantee CATHERINE		04/19/2017	CAN		RUSSE		Date01/18 Date04/18	
12. PREPARER	0.011000	OTHY JOST	Jan Jan		Number.	(207) 725	-4000		
	•	LM STREET					cumberland	ltitle.com	

BRUNSWICK, ME 04011

_____Fax Number

DETTO

11. OATH

DLN: 1001740013285

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

DECLARATION

Registry	Sagadahoc
Date Recorded	04/14/2017
Time Recorded	03:01:00 PM
ransfer Tax Amount	\$0.00
Document Number	2017r-02565
	2017

NE.	ווט	111 LE 30, WI.N.S.A. 3E	_110113 994641-	404	Tr	ansfer T	Гах Amount	\$0.0	00	
Sagadaho	c						ent Number			 55
1. County						Dodani			<u> </u>	
BATH								201		
2. Municipality	/Township						-	256		
3. GRANTEE/						ВО	OK/PAGE—RE	GISTRY	JSE ONLY	·
PURCHASER	MERRY 3a) Name (LAST)	ANNE (FIRST)				√ I ⁄⁄I)	3b) SSN or Fed	eral ID		
	MERRY 3c) Name (LAST)	MARK (FIRST)			F	(3d) SSN or Fed	eral ID		
	20 CAMPBELL I	POND ROAD								
	WEST BATH 3f) City						ME 3g) State		04530 h) Zip Code	
4. GRANTOR/		ADVC M WALKE							n) zip code	
SELLER	4a) Name (LAST)	ADYS M. WALKEI	Κ.		{N	AI)	4b) SSN or Fed	eral ID		
					•	•				
	4c) Name (LAST)	(FIRST)			(/)	4 1)	4d) SSN or Fed	eral ID		
	20 CAMPBELL I	POND ROAD								
	4e) Mailing Address									
	WEST BATH						ME	(04530	
- DDODEDTI/	4f) City						4g) S		4h) Zip Co	de
5. PROPERTY	5a) Map Blo	ck 050	Sub-Lot	des	cribes the prop k any that ap	perty being ply:	r the code numb g sold . (See instru			
	11 GRAFFAM W	AY		ìΗ	No tax map Multiple pa		0.35			
	5c) Physical Location			, <u> </u>	Portion of p	arcel	5d) Acreage			
6. TRANSFER TA	X 6a) Purchase Price (l	f the transfer is a gift, ente	r "0")		6	\$0		**************************************		.00
	6b) Fair Market Value if 6a) was of nomina	e (enter a value only if you I value)	ı entered "0" in 6a)	or	61	\$27	9,000			.00
D 1 CD		X Check the box if either	grantor or grantee is	s clair	ning exempt	ion from	transfer tax an	d expla	in.	-
Deed of D	istribution from Esta	ate 								
7. DATE OF TRA 04 MONTH	NSFER (MM-DD-YYYY) 11 DAY PEAR 2017 YEAR	8. WARNING TO BUYER-If the front a substantial financial							_	use.
9. SPECIAL CIRC n the transfer w	UMSTANCES—Were there an hich suggest that the price paket value? If yes, check the box	id was either more or less	10. INCOM	TE TA	X Seller I	incom nas qualif	s) not required e tax because: fied as a Maine en received fro	residen	hold Maine	•

Consideration for the property is less than \$50,000 Foreclosure Sale Aware of penalties as set forth by Title 36 §4641-K, we hereby swear 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) and Grantor(s) or their authorized agent(s) are required to sign below: ESTATE OF GLADYS M. W. A. K. ENR/18/2017 Grantor Date 04/18/2017 ANNE M MERRY Date 04/18/2017 MARK R MERRY 04/18/2017 Grantor Date Grantee_ 12. PREPARER DEANNA WOLFE Phone Number (207) 386-0400 Name of Preparer 746 HIGH STREET E-Mail Address <u>dwolfe@hablaw.com</u> Mailing Address BATH, ME 04530

DLN: 1001740013284

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	04/14/2017
Time Recorded	02:58:00 PM
ransfer Tax Amount	\$690.80
Document Number	2017r-02564
Book	2017

DE'	TTD	TITLE 36, M.R.S.A. S	ECTIONS SSACAL	464111		Time Reco	orded <u>C</u>	2:58:00 P	<u>M</u> _
- NE	טוו	111LE 30, W.N.S.A. 3	ECTIONS 994641-4	104111	Tran	sfer Tax Am	ount _\$	690.80	
Sagadaho)c				D	ocument Nu	mber 2	2017r-0256	54
1. County						I	Book 2	2017	
BATH							Page 2	2564	
2. Municipality	r/Township						_	RY USE ONLY	
3. GRANTEE/ PURCHASER	MEDDA			ļ			·		
	MERRY 3a) Name (LAST)	ANNE (FIRST)			M (MI)	3b) SSN	or Federal I	D	
	MERRY	MARK			R				-
	3c) Name (LAST)	(FIRST)	·		(MI)	3d) SSN	or Federal I	D	
	20 CAMPBELL	POND ROAD							
	3e) Mailing Address BATH						ME	04530]
	3f) City					<u> </u> 3g	g) State	3h) Zip Code	
4. GRANTOR/ SELLER	CISTERNELLI	SUSAN			W				
JELLEN	4a) Name (LAST)	(FIRST)			(MI)	4b) SSN	or Federal I	D	
	4c) Name (LAST)	(FIRST)			(MI)	4d) SSN	or Federal I	D	
	5 RICHARDS RO 4e) Mailing Address	JAD							
	YARMOUTH PO	ORT					MA	02675	
	4f) City						4g) State	4h) Zip Co	de
5. PROPERTY	43	050				—Enter the code ty being sold . (Se			
		ock Lot	Sub-Lot (Check any t		y:			i
	11 GRAFFAM W	VAY		Multi	ple parce	els 0.	.35		
	5c) Physical Location			Portio	on of par	cel 5d) Ac	reage		
6. TRANSFER TA	AX 6a) Purchase Price (lf the transfer is a gift, er	nter "0")		ба	\$156,750			.00
		e (enter a value only if y	ou entered "0" in 6a)	or					اً م
	if 6a) was of nomina				6b				00.
	6c) Exemption claim -	- Check the box if eith	er grantor or grantee is	claiming e	xemptio	n from transfer	tax and ex	kplain.	
04	11 2017	WARNING TO BUYER— front a substantial financial							
MONTH	DAY YEAR							CLASSI	FIED
	CUMSTANCES—Were there are which suggest that the price p	, ,		IE TAX WITI		Buyer(s) not red		withhold Maine	=
	ket value? If yes, check the bo			<u> </u>	Seller has	qualified as a f	Maine resi		
						has been receiv ation for the pro			
					oreclosu	•	operty is n	C33 (11a11 \$50,00	
11. OATH	Aware of penalties as s	et forth by Title 36 §4641- f, it is true, correct, and com	K, we hereby swear or a	affirm that	we have	each examined	this retur	n and to the b	est of
			04/18/2017 Grante			ERRY		Date 04/18/	2017
	Grantee	Date	04/18/2017 Grant		RKRM	IERRY		Date 04/18/	2017
12. PREPARER		ANNA WOLFE				(207) 386-040			
	Mailing Address 746	HIGH STREET		F-Mail /	Address	dwolfe@habl	aw.com		

Fax Number

BATH, ME 04530

DLN: 1001740013287

Registry	Sagadahoc
Date Recorded	04/14/2017
Time Recorded	03:03:00 PM
Transfer Tax Amount	\$0.00
Document Number	
	2017
Page	2566

KE	ווט	TITLE 36, M.R.S.A. SECTION	S §§4641-4641N	Transfer	Tax Amount \$0.00	
Sagadaho	oc				ment Number 2017r-0	2566
1. County						2300
BATH			\neg		Book 2017	
2. Municipality	/Township				Page 2566	
3. GRANTEE/				В	OOK/PAGEREGISTRY USE ON	ILY
PURCHASER	MERRY	ANNE		M		
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Federal ID	
	MERRY 3c) Name (LAST)	MARK (FIRST)		R (MI)	3d) SSN or Federal ID	
		ELL POND ROAD	****		54, 55.11 61 1 Cacianib	
	3e) Mailing Address					
	WEST BATI	H			ME 0453	0
	3f) City				3g) State 3h) Zip C	ode
4. GRANTOR/ SELLER	MERRY 4a) Name (LAST)	ANNE (FIRST)		M (MI)	4b) SSN or Federal ID	
	MERRY 4c) Name (LAST)	MARK (FIRST)		R (MI)	4d) SSN or Federal ID	
		LL POND ROAD			4d) 33N of Federal ID	
	4e) Mailing Address					
	WEST BATH	<u> </u>			ME 0453	
5. PROPERTY	4f) City		T chi	Francisco Con	4g) State 4h) Zi	p Code
J. PROPERTY	43	050	descr		ng sold . (See instructions)—»	02
	Sa) Map	Block Lot Sub	p-Lot	No tax maps exist		
	11 GRAFFA	M WAY	, —	Multiple parcels Portion of parcel	0.35	
	5c) Physical Location			-ortion of parcer	5d) Acreage	
6. TRANSFER TA	AX 6a) Purchase P	Price (If the transfer is a gift, enter "0")		6a \$0		.00
	6b) Fair Marke if 6a) was of no	t Value (enter a value only if you enter ominal value)	ed "0" in 6a) or	6b \$2	79,000	.00
	6c) Exemption	claim – \overline{X} Check the box if either grantor	r or grantee is claimi	ing exemption from	n transfer tax and explain	
Affecting		reate Joint Tenancy	or granner to commi	.9 	aanara taxana axpianii	
7. DATE OF TRA	ANSFER (MM-DD-YYYY 11 2017 DAY YEAR	8. WARNING TO BUYER-If the prop front a substantial financial penalty	,		subdivision, partition or chang	
		nere any special circumstances price paid was either more or less	10. INCOME TAX	•	r(s) not required to withhold N ne tax because:	laine
	ket value? If yes, check	•			lified as a Maine resident	
		_		\vdash	een received from the State Ta	
				Consideration Foreclosure Sa	for the property is less than \$5 le	50,000
11. OATH	Aware of penaltic	es as set forth by Title 36 §4641-K, we here	eby swear or affirm			ne best of
	our knowledge and	belief, it is true, correct, and complete. Gra	ntee(s) and Grantor	(s) or their authoriz	zed agent(s) are required to sig	gn below:
	MADICA	MERRY Date 04/18/2		ANNE M MERI		/18/2017
12. PREPARER	Grantee	R MERRY Date 04/18/2		MARK R MERI		18/2017
12.F NLFANEN	Name of Preparer	DEANNA WOLFE 746 HIGH STREET		•	7) 386-0400 olfe@hablaw.com	
	Mailing Address .	BATH, ME 04530	-	Mail Address <u>dwo</u> x Number		

PROCESSED ONLINE.

DLN: 1001740013324

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc
Date Recorded	04/14/2017
Time Recorded	03:06:00 PM
Transfer Tax Amount	\$761.20
Document Number	2017r-02568
	2017
	2568

DO NOT RE-PROCESS.		. г	DECLARATION			oute Recorded _	04/14/2017	
	TTD		S.A. SECTIONS §§4	641-4641N	Т	ime Recorded _	03:06:00 P	M
···			5	011 101111	Transfe	r Tax Amount	\$761.20	
Sagadaho	C				Docu	ment Number	2017r-025	68
1. County						Book	2017	
BATH						Page 2	2568	
2. Municipality	/Township				[BOOK/PAGE—REGIS		
3. GRANTEE/ PURCHASER	WEST 3a) Name (LAST)	BAR (FIRST)	RBARA	<u> </u>	(MI)	3b) SSN or Federal	ID .	
	BARTER 3c) Name (LAST)	MAI (FIRST)	RLENE		E (MI)	3d) SSN or Federal	ID	
	13 SOUTH RI 3e) Mailing Address	VER ROAD	17403012					
	ARROWSIC					ME	04530	
4. GRANTOR/ SELLER	VANWICKLE 4a) Name (LAST)	ER WIL	LIAM		(MI)	3g) State 4b) SSN or Federal	3h) Zip Code	
	4c) Name (LAST)	(FIRST)			(MI)	4d) SSN or Federal	ID	
	53 PINE STRE	EET						
	4e) Mailing Address						7	
	BATH					ME	04530	
5. PROPERTY	4f) City			Flat Tonia	-f	4g) State		de
J. PROPERTY	33 5a) Map	Block Lo		describes		nter the code number t ing sold . (See instruction		
	53 PINE STRE	EET		Mul	ax maps exist tiple parcels	0.25		
	Sc) Physical Location			— L Port	ion of parcel	5d) Acreage		
6. TRANSFER TA	X 6a) Purchase Pri	ce (If the transfer is a g	jift, enter "0")		6a \$1	73,000		.00
	6b) Fair Market V if 6a) was of non	/alue (enter a value or	ily if you entered "0" i	in 6a) or	6b	10.00		.oo
	·	im – Check the box	if either grantor or gran	ntee is claiming		m transfer tax and e	explain.]
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BU	JYER-If the property is o	classified as Farn	nland. Open Si	pace. Tree Growth, o	or Working Wate	-r-
04 MONTH	14 2017 DAY YEAR	front a substantial	financial penalty could I	be triggered by	development,	subdivision, partitio	on or change in CLASSI	
in the transfer w	UMSTANCES—Were then thich suggest that the prion ket value? If yes, check the	ce paid was either more			inco Seller has qua A waiver has l	er(s) not required to me tax because: alified as a Maine res peen received from a for the property is ale	sident the State Tax As	ssessor
11. OATH	Aware of penalties our knowledge and b	as set forth by Title 36 § elief, it is true, correct, an	i4641-K, we hereby swe id complete. Grantee(s)	ear or affirm that and Grantor(s)	we have each	n examined this retuized agent(s) are rec	ırn and to the b quired to sign b	est of elow:
		I VANWICKLER		Grantor BA	RBARA W	EST	Date 04/18	/2017
	Grantee		Date <u>04/18/2017</u>	Grantor <u>MA</u>	RLENE E I	BARTER	Date 04/18	/2017
12. PREPARER		DEANNA WOLFE		Phone		07) 386-0400		
	Mailing Address	746 HIGH STREET		E-Mail	Address <u>dw</u>	olfe@hablaw.com		

BATH, ME 04530 Fax Number

Merits: 0011747678516 Trips: 9171430960033



0599900 **RETTD**

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

4 12012017 10:54 A M
2017 R-02669
Transfer Tax of 0:00
State of Maine Transfer Tax
SAGADAHOC COUNTY MAINE

SAGAD		NOT USE RED INK!	State SAGA	of Maine Transfer Tax DAHOC COUNTY MAINE
2. MUNICIPALIT				2017 - 2669
BATH_		and the same and the same	1	K/PAGE—REGISTRY USE ONLY
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) CONCOL/NO S.U.S 3c) Name (LAST, FIRST, MI)	SAN A		
	3e) Mailing Address 1.3 ANDREWS RI 3f) City BATH 4a) Name (LAST, FIRST, MI)			3g) State 3h) Zip Code M, E 0 4530
4. GRANTOR/ SELLER	FRANCIS, SAIN-	cy		
	4e) Mailing Address 31 OA KGROVE A 4f) City BATH			4g) State 4h) Zip Code M E 0 4530
5. PROPERTY	5a) Map Block 25 5c) Physical Location	Lot 57 - Sub-Lot	Check any that apply: No tax maps exist Multiple parcels Portion of parcel	5b) Type of property—Enter the code number that best describes the property being sold. (See instructions) 5d) Acreage:
6. TRANSFER TAX	6a) Purchase Price (If the transfer is a g	jift, enter"0")	ба	<i></i>
	6b) Fair Market Value (enter a value on if 6a) was of nominal value)	lly if you entered "0" in 6a) or	6b	
	6c) Exemption claim – Check the box	if either grantor or grantee is claim	ing exemption from trans	fer tax and explain.
	7. DATE OF TRANSFER (MM-DD-YYYY) 07 09 2015 MONTH DAY YEAR	Tree Growth, a Subs subdivision, partitio	tantial financial penalty con nor change in use.	sified as Farmland, Open Space or ould be triggered by development, CLASSIFIED
which suggest the lifyes, check the k		its fair market value?		 Buyer(s) not required to withhold Maine income tax because: d as a Maine resident
Giff	from Mother to	Baughter	1 :	received from the State Tax Assessor the property is less than \$50,000
11. OATH	Aware of penalties as set forth by Title our knowledge and belief, it is true, correct Grantee	t, and complete. Grantee(s) and Gra Date <u>QDAPR17</u> Grantor	ntor(s) or their authorized	agent(s) are required to sign below: Date
49 DUTCANES	**************************************	Date Grantor		Date
12. PREPARER	Name of Preparer Mailing Address			

Merits: 0011747679929 Trips: 9171430960059



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

04/21/2017 11:20 AM 2017R-02605

1. County						1		Transfer Tax	of 754,60
Sagadahoc								State of Maine 1 AGADAHOC CO	
2. Municipality/	Township				_			2017 -	2195
Bath			,					2011-	~ 25 ()
3. GRANTEE/						1	BOOK/F	AGE—REGISTR	Y USE ONLY
PURCHASER	3a) Name LAST or BUSIN	NESS, FIRST, MI				 			
	MERRILL 3c) Name JAST or BUSIN	NECE FIRET M	ANDR	EW	· · · · · · · · · · · · · · · · · · ·	J.			
	1 LARKE		Ton	nifer					
	3el Malling Address 410 FARMING		ا اعتی	7111 CA -					
	410 FARMING	FION RD.		N				3g) State	3h) Zip Code
	MILTON			مشربت وسيوسيها سويظا ياسوا				NH	03851
4. GRANTOR/	4a) Name, LAST or BUSIN	NESS, FIRST, MI							
SELLER	MCGUIRE		SHAW	/N					
	4c) Name, LAST or BUSIN	NESS, FIRST, MI				1			
	4e) Mailing Address 58 UNION ST	TOCET							
		IREEI		-, 		••••			
	4f) City							4g) State	4h) Zip Code
	BATH				-			ME	04530
5. PROPERTY	5a) Map	Block	Lot	Sub-Lot				code number that I, (See instructions	
	27		185			ny that apply	_	2, <i>(200</i> 113) 10011011	′ - <u> </u>
	Sc) Physical Location					lo tax maps e	Y	d) Acreage	······································
	58 Union Street				: —	fultiple parce ortion of parc			
6. TRANSFER TA	X 6a) Burchaco (Orica (if the tran	sfer is a gift, ente			1	<u> </u>		474 500 00
			isier is a girt, ente i value only if yo		60) 05	ба			171,500.00
	if 6a) was of n		value otily ii yo	u entered o m	Oaj Oi	6b			
	6c) Exemption	claim - Che	ck the box if either	r grantor or grante	ee is claimir	L na exemption	from tran	nsfer tax and exc	olain.
					· · · · · · · · · · · · · · · · · · ·				
7 DATE OF TRA	NSFER (MM-DD-YYY)	V) P WADA	ING TO BUYER-If t	the property is els	reified as E	armland One	n Space T	Trop Grouth orl	Marking Water
	19 2017		ubstantial financial						
MONTH	DAY YEAR								CLASSIFIED
	TUMSTANCES—Were the property of the property o			10. INC	COMETAX			ot required to w x because:	ithhold Maine
	ket value? If yes, check							as a Maine resid	ent
						===			e State Tax Assessor
					-	Considera Foreclosu		ne property is le	ss than \$50,000
11. OATH	Aware of negati	ios as set forth h	v Titla 36 84641-K	we hereby swear	r or affirm t			ningd this return	and to the best of
11.01.11	our knowledge and	d belief, it is true,	correct, and comp	, we nereby swear plete. Grantee(s) a	nd Grantori	(s) or their au	horized a	gent(s) are requ	ired to sign below:
	Grantee X	ll cubbe	Date _		rantor <u></u>		<u>}</u>		Date 4/19/17
44 00000	Grantee Kan		Date		irantor				Date
12. PREPARER	Name of Preparer		osing Services, LLC		Pho	one Number_	(207)77		
	Mailing Address	707 Sable Oaks South Portland,	Drive, Suite 350 ME 04106			Mail Address ,	dosings (207)77	@hdtitle.com	
CDD			.maine.gov/reven	ue/nronertytay/t		c Number /transfertax.l		U-000 I	

Merits: 0011747678923 Trips: 9171430960047



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

04/21/2017 3:33 PM

KE	IID	ITTLE 36, M.R.S.A. SEC	TIONS 554641-46	541N	, .	-02726
1. County SAGADAI	ioc		•		Transfer Ta State of Main	ox of 136.40 e Transfer Tax
2. Municipality/			*****		SAGADAHOC (COUNTY MAINE
BATH	iownsnip				2017.	-2726
					BOOK/PAGE—REG	
3. GRANTEE/ PURCHASER					BOONPAGE—REG	
	ORDWAY,	ROY A.				
	3c) Name J.AST or BUSI	NESS, FIRST, MI				
	t	N, KERMIT A.				
	3e) Mailing Address 141 NORT	H STREET		***************************************		
	3f) Gity BATH				3g) State ME	3h) Zip Code 1 04530
4. GRANTOR/	4a) Name, LAST or BUSI	NESS, FIRST, MI				J 1
SELLER	FANNIE M					
	4c) Name, LAST or BUS	NESS, FIRST, MI			ł	
	<u> </u>			······································		
	4e) Mailing Address	LLAS PARKWAY, S	SUTTE 100	10		
	4f) City				4g) St	i ate 4h) Zip Code
	DALLAS		, , , , , , , , , , , , , , , , , , , 		TX	
	50.11-	DL de	6.L.			
5. PROPERTY	5a) Map 27	Block Lot 151	Sub-Lat	describes the propert	—Enter the code number ty being sold. (See instruc	
	<u> </u>			heck any that apply No tax maps e		
	5c) Physical Location 11 WESLEY	STREET		Multiple parce	4	
<u> </u>				Portion of pare	cel	months of the way of the second of the secon
6. TRANSFER TA	6a) Purchase	Price (If the transfer is a gift, ente	er"0")	6a		62000 .00
		et Value (enter a value <mark>only</mark> if you ominal value)	ı entered "0" in 6a) (or 6b		.00.
	6c) Exemption	claim – Check the box if either	grantor or grantee is o	L laiming exemption:	n from transfer tax and	d explain,
Grantor is	exempt as an ag	ency of the United States				
J	NSFER (MM-DD-YYY	Y) 8. WARNING TO BUYER-If th	ne property is classifie	ed as Farmland, Ope	en Space, Tree Growth	ı, or Working Water-
04-	21-2017	front a substantial financial j	penalty could be trigg	gered by developm	ent, subdivision, part	ition or change in use. CLASSIFIED
MONTH 9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were t	here any special circumstances	10, INCOME	TAX WITHHELD-	Buyer(s) not required	
in the transfer w		price paid was either more or less 🕹	J′		income tax because:	
than its fall mai	ket value: II yes, check	tile box and explain:		2000	i qualified as a Maine has been received fro	m the State Tax Assessor
					liee fackbar Flede	apply the property states
					Association	
11. OATH		ies as set forth by Title 36 §4641-K, \ d belief, it is true, correct, and comple		antor(s) or their au	thorized agent(s) are-	PERSONAL TECHNICATION OF TECHNICATION OF THE PERSON OF THE
	Grantee Pro	0.0 Date 4	1/21/17 Granto	as ns an	OFFICE PARCE	Date
an Phraine	Grantee / j Cel	Date	Granto)r	607.440.707	Date
12. PREPARER	Name of Preparer	David A. King, Esq. 108 Front Street		Prione Number_	207-442-7971 lawoffices_daveaking	ı@comcast.net
	Mailing Address	Bath, ME 04530		E-Mail Address Fax Number	207-442-7910	
_		http://www.maino.com/rowanu	o/nronorhetay/transf			

Merits: 0011747679627 Trips: 9171430960055



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

04/24/2017 10:55 AM

RE7	Γ TD	TITLE 36, M.R.S.A. SECTIONS §	§\$4641-46	41N		ZUI/K- Transfer Ta		
1. County						State of Maine	Transfer T	ax
SAGADAI	HOC				-	AUMBAILUE C	JOHIII MAI	
2. Municipality/	Township				2	1017 -	วาน	9
BATH							211	1
3. GRANTEE/		And the second s			воок	Pageregisti	RY USE ONLY	•
PURCHASER	3a) Name LAST or BUS REDLON W	NESS, FIRST, MI VESTERN, LLC			_			
	3c) Name, LAST or BUS							
	3el Mailing Address 5 HAROLD	'S WAY	***					
	3f) City FREE PORT					agi state	04032	
4. GRANTOR/	4a) Name, LAST or BUS					ME	04032	
SELLER	ECO-PART		***					
	4cl Name LAST or BUS	INESS, EIRST, MI						
	4e) Mailing Address	STREET		,		•		
	4f) City					4g) State	4h) Zip (Code
	RICHMOND					ME	0435	7
5. PROPERTY	5a) Map	Block Lot Sub-Lo		5b) Type of property—	Enter the	code number that	it best	
	31	69		describes the property neck any that apply:	being sol	ld. (See instruction	(s)—»	
	5c) Physical Location	<u> </u>	_	No tax maps ex	-	5d) Acreage		
	0 WESTERN	N AVENUE		Multiple parcels Portion of parce			-	
6. TRANSFER TA	X 60) Durchase	Price (If the transfer is a gift, enter "0")			L	1	0400	\bigcap \bigcap
		et Value (enter a value only if you entered	1"0" în 6a) o	6a			0400	0.00
		nominal value)	i o in onyo	" 6b				.00
	6c) Exemption	claim – Check the box if either grantor or	r grantee is c	laiming exemption	rom tra	nsfer tax and ex	plain.	
		The same of the sa	e		· 			
1	NSEER (MM-DD-YYY	 8. WARNING TO BUYER-If the propert front a substantial financial penalty co 						
4 /20 MONTH	DAY YEAR	ttour a substattias inianciai hanaità co	Julia de aliggi	ered by developme	iit Subu	ivision, paruuoi		SIFIED
9. SPECIAL CIRC	UMSTANCES-Were	there any special circumstances price paid was either more or less	10. INCOME	TAX WITHHELD-B			vithhold Mai	ine
		the box and explain:				ix because: as a Maine resi	dent	
				:=		received from t		
## 7 · · · ·				Foreclosure		he property is l	ess than \$50,	,000
11.OATH	Aware of penalt	ies as Sex forth by Title 36 §4641-K, we hereby	y swear or af	firm that we have ea	ch exar	nined this retur	n and to the	best of
	our knowledge in Grantes	Belief, it is true, correct, and complete. Grant Date	ee(s) and Gra Grantor	1)7	orized	igent(s) are req		20 / 17
	Grantee	Date	Granto		۷'		Date	
12. PREPARER	Name of Preparer	James E. Smith, Esq.		Phone Number_	1-0622			
	Mailing Address	49 Pleasant Street Brunswick, ME 04011		E-Mail Word 622	s@maii	nestatelaw.com		
=		E. GIOTION, ITIL UTU I I		Fax Number _				

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

DLN: 1001740013447

Registry	Sagadahoc
Date Recorded	04/24/2017
Time Recorded	02:24:00 PM
sfer Tax Amount	\$651.20

RE'	TTD	TITLE 36, M.R.S.A. SECTIONS §§464	11-4641N		me Recorded Tax Amount	9651 20	'M
Sagadaho	oc						
1. County				Docur	nent Number	2017r-027	<u>70</u>
BATH					Book	2017	
2. Municipality	//Township		ĺ		Page	2770	
3. GRANTEE/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			В	OOK/PAGE—REG	SISTRY USE ONLY	
PURCHASER	MARTIN 3a) Name (LAST)	JOSEPH QUINN (FIRST)		(MI)	3b) SSN or Fede	eral ID	
	MARTIN 3c) Name (LAST)	EKATERINA (FIRST)		(MI)	3d) SSN or Fede	eral ID	
	113 LOWER 3e) Mailing Address	ROUND POND RD					
	BRISTOL 3f) City				ME 3g) State	04539 3h) Zip Code	
4. GRANTOR/ SELLER	PATTISON 4a) Name (LAST)	HOLLIS (FIRST)		A. (MI)	4b) SSN or Fede		
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	ral ID	
	1601 MAIN S 4e) Mailing Address	ST					
	NEWINGTO	N			CT	06111	
	4f) City				4g) St		ode
	26 5a) Map 850 WASHIN 5c) Physical Location	Block Lot Sub-Lot IGTON ST	Check any to take the Multi	the property being that apply: ax maps exist iple parcels on of parcel	ng sold . (See instruc 0.06	ctions)—» 202	
6. TRANSFER TA	AX 6a) Purchase Pr	rice (If the transfer is a gift, enter "0")		6a \$1	48,000		.00
		Value (enter a value only if you entered "0" in	6a) or	6b			00.
	6c) Exemption cl	laim – Check the box if either grantor or grante	e is claiming e	<u> </u>	n transfer tax and	d explain.]
7. DATE OF TRA	ANSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the property is class	ssified as Farm	land, Open Sp	ace, Tree Growth	ı, or Working Wate	er-
04 MONTH	24 2017 DAY YEAR	front a substantial financial penalty could be	triggered by d	levelopment, s	subdivision, parti	ition or change in CLASSI	
in the transfer w		ice paid was either more or less		incon Seller has qual A waiver has b	ne tax because: ified as a Maine r een received fror	m the State Tax As	sessor
				Foreclosure Sa	le	is less than \$50,00	
11. OATH	our knowledge and I	s as set forth by Title 36 §4641-K, we hereby swear belief, it is true, correct, and complete. Grantee(s) an	nd Grantor(s) o	r their authoriz	zed agent(s) are r	required to sign b	elow:
		04/04/2017	TYLE A	EPH QUIN		Date 04/24	
13 DDEDARER	Grantee		Unito:	TERINA M		Date04/24/	2017
12. PREPARER	Name of Preparer _	JULIE CRIDER			7) 563-8104		
	Mailing Address 🔔	10 WATER ST, PO BOX 760	<u>-</u>		ec@robgregory.c	om	
	_	DAMARISCOTTA, ME 04543	Fax Nur	mber			

DLN: 1001740013435

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	04/26/2017
Time Recorded	02:54:00 PM
Transfer Tax Amount	\$228.80
Document Number	2017r-02811
Book	2017
Page	2811
	ICTDVI ICT ON IV

RE1	ΓTD	TITLE 36, M.R.S.A. SE	CTIONS §§4641-4641N		Time Recorded		IVI
				Tran	nsfer Tax Amount	\$228.80	
Sagadaho 1. County	C			D	ocument Number	2017r-028	1
					Book	2017	
BATH . Municipality	Township				Page	2811	
. GRANTEE/	Township			1	BOOK/PAGE—REG	SISTRY USE ONLY	
PURCHASER	SECRETARY OF 3a) Name (LAST)	HOUSING AND	URBAN DEVELOI	PMENT	3b) SSN or Fede	ral ID	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Fede	ral ID	
	2401 NW 23RD S	T SUITE 1D					
	3e) Mailing Address						
	OKLAHOMA CIT	ΓY			OK		
. GRANTOR/	3f) City				3g) State	3h) Zip Code	
ELLER	CITIMORTGAGE 4a) Name (LAST)	E INC. (FIRST)		(MI)	4b) SSN or Fede	ral ID	
	4c) Name (LAST)	(FIRST)		(Mi)	4d) SSN or Fede	ral ID	
	1000 TECHNOLO	OGY DRIVE		7	·		
	4e) Mailing Address						
	O'FALLON				МО	63368	
	4f) City				4g) S1	ate 4h) Zip Co	de
. PROPERTY	20 Bloc	064 Lot	000 describ		•		
	14 DENNY RD B	ATH ME 04530	1 🗔	ultiple parc			
	5c) Physical Location		Po	rtion of par	cel 5d) Acreage		
TRANSFERTA	X 6a) Purchase Price (If	the transfer is a gift, ente	er "0")	ба	\$0		.00
	6b) Fair Market Value if 6a) was of nominal	(enter a value only if you	u entered "0" in 6a) or	6b	\$103,840		.00
	,	,			ŕ		1
4641 a (1)	Governmental Entit		grantor or grantee is claimin				faina an a
		ies. Deeds to prope	ity transferred to or	by the t	Jinted States, ti	le State of IV	iaine or a
			he property is classified as Fa penalty could be triggered b				use.
. SPECIAL CIRC In the transfer w	CUMSTANCES—Were there any hich suggest that the price pai ket value? If yes, check the box	id was either more or less	10. INCOME TAX W	Seller ha	Buyer(s) not required income tax because: s qualified as a Maine has been received fro ation for the property ure Sale	resident m the State Tax As	sessor

11. OATH Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear 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) and Grantor(s) or their authorized agent(s) are required to sign below: Grantee <u>CITIMORTG</u>AGE INC. 04/26/2017 Grantor SECRETARY OF HOUSING AND WARANIODE VELOPM

Date 04/26/2017 04/26/2017 Grantor Grantee_ Date 12. PREPARER SHIRLEY SKOLNEKOVICH Phone Number <u>(412) 766-1905</u> Name of Preparer 1200 CHERRINGTON E-Mail Address shirley.skolnekovich@svclnk.com Mailing Address MANCHESTER, PA 15108 Fax Number

Merits: 0011747680236 Trips: 9171430960073



RE	ITD	TITLE 36, M.R.S.A. SECTIONS §§4641-	4641N	04/28/2017 10:54 AM 2017R-02834
1. County				2U1/K-U2034 Transfer Tax of 730,40
Sagadahoo				State of Maine Transfer Tax AGADAHOC COUNTY MAINE
2. Municipality	/Township			2017 - 2834
Bath				
3. GRANTEE/ PURCHASER			BOOK/F	PAGE—REGISTRY USE ONLY
	3a) Name LAST or BUSINESS WESTLAKE	, FIRST, MI ROBERT	N.	
	3c) Name, LAST or BUSINESS			
	WESTLAKE	ROBIN		•
	3e) Mailing Address 372 MAIN ROAL)		
	31) City PHIPPSBURG			3g) State 3h) Zip Code ME 04562
4. GRANTOR/	4a) Name, LAST or BUSINESS	, FIRST, MI		
SELLER	RAINEY	LEONARD	· [.	
	4c) Name, LAST or BUSINESS RAINEY	FIRST.MI PAMELA	c.	
		FAMELA		
	4e) Mailing Address 14 CRAWFORE	DRIVE		
	4f) City			4g) State 4h) Zip Code
	BATH			ME 04530
5. PROPERTY	5a) Map	Block Lot Sub-Lot	5b) Type of property—Enter the	code number that best
271 1101 2111 1	22	086	describes the property being solo Check any that apply:	f. (See instructions)—»
	5c) Physical Location	A Landon Marie Control of the Contro	No tax maps exist 5	d) Acreage
	14 Crawford Drive	Manufacture	Multiple parcels Portion of parcel	
6. TRANSFER TA	IX Cal Durahara Dala	//Est		PRODUCTION OF THE PRODUCTION O
		e (If the transfer is a gift, enter "0") Ilue (enter a value only if you entered "0" in 6a	6a L	\$ 166,000.00
	if 6a) was of nom		6b	
	6c) Exemption claim	m – Check the box if either grantor or grantee	is claiming exemption from tran	sfer tax and explain.
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the property is classi		
04	27 2017 DAY YEAR	front a substantial financial penalty could be tr	iggered by development, subdi	CLASSIFIED
	CUMSTANCES—Were there		METAX WITHHELD-Buyer(s) no	
	vhich suggest that the pric ket value? If yes, check the	e paid was either more or less box and explain:	income tax X Seller has qualified	
				eceived from the State Tax Assessor
			Consideration for th	e property is less than \$50,000
11. OATH	Aware of penalties	s set forth/by Title 36 §4641-K, we hereby swear o	r affirm that we have each exam	ined this return and to the best of
	1 0 [/1]	lief, it is true correct, and complete. Grantee(s) and	$\Psi \wedge (1) \supset A$., /27/15
	Grantee Grantee	Date 7277 Gran	ntor Damila Cil	2 MOUL Date 4-27-17
12. PREPARER		hn Wm. Voorhees, Esq.	Phone Number(207)44	
-	Mailing Address83	9 Washington St.	E-Mail Address <u>john@v</u>	oorheeslaw.com
		th, ME 04530 http://www.maine.gov/revenue/propertytax/trai	Fax Number	
SPR		urrhat an annous Anaties endethinhei ràrgys regi	isist mar transici tavaitiii	

9171430960075

RE'	OO. 2RETTD*	REALI	STATE DECL/	ENUE SERVI TRANSFER ARATION § 4641-4641N	TAX	2017F Transfer T State of Mai	017 11:29 AM R-02840 ax of 5504,40 ne Transfer Tax
1.County SAGADA	HOC					SAGADAHOC	COUNTY MAINE
2. Municipality	/Township	 		<u>~~~</u>		2017 -	- 2840
CITY O	F BATH						~0 (0
3. Grantee/ Purchaser	3a) Name LAST or BUSINESS, FIR BATH SAVING 3c) Name, LAST or BUSINESS, FIR 3e) Mailing Address after purcha	S INST		ION		Book/Page—regist	RY USE ONLY
	105 FRONT S' 3f) Giv BATH	TREET				y, sale ME	04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINESS, FIF BANK OF AME 4c) Name. LAST or BUSINESS. FIF 4e) Mailing Address	RICA, 1	I.A.	DT 3 CF			
	13850 BALLA 40Gby CHARLOTTE	MIYNE (CORP	PLACE		4g) State NC	4h) ZIP Code 28277
5. PROPERTY	5a) Map Blo 27 - 5c) Physical Location 83 FRONT STR		Lot 23	Sub-Lot			
6.TRANSFERT	6a) Purchase Price (li	the transfer is	a gift, en	ter"0")		1,2	51,000
	6b) Fair Market Value if 6a) was of nominal		only if ye	ou entered "0" in	1 6a) or 6b	,	
	6c) Exemption claim -	Check the 1	box if eithe	er grantor or grant	ee is claiming exemption f	rom transfer tax and e	xplain.

DAY YEAR

Vorking Wateror change in use. CLASSIFIED

9. SPECIAL CIRCUMSTANCES—Were there any special circumstances in the transfer which suggest that the price paid was either more or less than its fair market value? If yes, check the box and explain: 10. INCOME TAX WITHHELD - Buyer(s) not required to withhold Maine income tax because:

✓ Seller has qualified as a Maine resident

A waiver has been received from the State Tax Assessor

			Consideration for the property is less than \$50,000 Foreclosure sale
11. OATH		d belief, it is true, correct, and complete. Grantee(s) and	or affirm that we have each examined this return and to the best of Granton's) or their authorized agent(s) are required to sign below: http://www.com/figures/figure
	Grantee	Date Gran	ntor Date
12. PREPARER	Name of Preparer	Melissa Zeller	Phone Number 816 - 410 - 7923
	Mailing Address	1201 Walnut St Suite 700	Email Address Mzeller@firstan.com
		Kansas City, mo 64106	Fax Number
Rev. 12/1	5	http://www.maine.gov/revenue/propertytax/trar	nsfertax/transfertax.htm

Rev. 12/15

DLN: 1001740013549

Registry	Sagadahoc
Date Recorded	04/28/2017
Time Recorded	02:06:00 PM
sfer Tax Amount	\$1,515.80
oumant Number	2017: 02852

RET	TTD	TITLE 36, M.R.S.A. S	SECTIONS §§4641-4641	N Transfer	Гах Amount	\$1.515.80	
Sagadahoo					•		
1. County				Docum	•	2017r-02852	
BATH				7	Book		
2. Municipality/	Township				Page	2852	
3. GRANTEE/	•	110		ВС	OK/PAGE—REGI	STRY USE ONLY	
PURCHASER	HASKELL	ELIZAB	FTH	С			٦
	3a) Name (LAST)	(FIRST)	LIII	(MI)	3b) SSN or Feder	al ID	_
	MCKNIGHT	PHYLLI	S	C			
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	al ID	
	P.O. BOX 25						
	3e) Mailing Address					7 104520	1
	BATH 3f) City				ME 3q) State	04530 3h) Zip Code	J
4. GRANTOR/		Inches		_	39,5000	311) Zip Code	7
SELLER	CHOATE 4a) Name (LAST)	VICTOR (FIRST)	UA	D (MI)	4b) SSN or Feder	alin	
	in the territory	(i iii.51)		(1911)	45) 33N 01 reden		\neg
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
	13 GOVERN	ORS LANE			, , , , , , , , , , , , , , , , , , , ,		
	4e) Mailing Address						
	BATH				ME	04530	
	4f) City				4g) Sta	ate 4h) Zip Code	<u>. </u>
5. PROPERTY	15	50		Type of property—Ente			\exists
	5a) Map	Block Lot	Sub-Lot Check	k any that apply:	•	201	
	13 GOVERN	JORS LANE		No tax maps exist Multiple parcels	2.59		
	Sc) Physical Location	TORS EPH E		Portion of parcel	5d) Acreage		
6. TRANSFER TAX 6a) Purchase Price (If the transfer is a gift, enter "0")				6a \$34	14,500	.0	0
				σω [ψ3			
6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)				6b		0.	10
	бс) Exemption о	laim – Check the box if eith	ner grantor or grantee is clain	ning exemption from	transfer tax and	explain.	
		_	5 0	,		•	
7 DATE OF TRAI	NSFER (MM-DD-YYYY) 8 WARNING TO BLIVED	If the property is classified as	Farmland Open Spa	ce Tree Growth	or Working Water-	_
	28 2017		ial penalty could be triggered				
MONTH	DAY YEAR					CLASSIFIED	
		iere any special circumstances irice paid was either more or less		K WITHHELD – Buyer	(s) not required t ie tax because:	to withhold Maine	
	et value? If yes, check t			_	fied as a Maine r	esident	
			•	\vdash		n the State Tax Assesso	r
				Foreclosure Sal		is less than \$50,000	
11. OATH		es as set forth by Title 36 §4641-					
	VICTOR	belief, it is true, correct, and com CIA D CHOATE Date	05/01/0015	or(s) or their authoriz ELIZABETH C	-	· ·	
			05/01/2017	PHYLLIS C MC		Date 05/01/201 Date 05/01/201	
12. PREPARER	Grantee Name of Preparer _	DIANE F. JACKSON			386-0400	Date	<u>—</u>
	Mailing Address -	746 HIGH STREET			kson@hablaw.co	om	
		BATH, ME 04530	.	ax Number			