DLN: <u>100174001</u>7470

Registry	Sagadahoc
Date Recorded	11/01/2017
Time Recorded	12:27:00 PM
Transfer Tax Amount	\$748.00
Document Number	2017R-08084
	2017
'	

RE	TTD	TITLE 36, M.R.S.A.	SECTIONS §§4641-46	541N _	i ine Recorde		IVI
Sacadah				Trans	sfer Tax Amoun	t <u>\$/48.00</u>	
Sagadaho	<u> </u>			Do	ocument Numbe	er <u>2017R-080</u>)84
	-				Bool	k <u>2017</u>	
BATH 3. Municipality	/Tournship				Page	e 8084	
2. Municipality 3. GRANTEE/	// Township					EGISTRY USE ONLY	
PURCHASER	TOWNSEN	D ROBER'	Т	C			
	3a) Name (LAST)	(FIRST)	•	(MI)	3b) SSN or Fed	deral ID	
	TOWNSEN 3c) Name (LAST)	D KAREN		G (MI)	3d) SSN or Fed	deral ID	
	362 MIDDL	E STREET			,		
	3e) Mailing Address					- C. (520)	\neg
	BATH 3f) City						
4. GRANTOR/					3g) Stat	te 3h) Zip Code	
SELLER	ESTATE OF 4a) Name (LAST)	F ALICE W. CLARK (FIRST)		(MI)	4b) SSN or Fed	deral ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Fed	deral ID	
		RD CLARK 19 CAME	BELL LANE				
	4e) Mailing Address						
	PHIPPSBUR	RG			MI	E 04562	
5. PROPERTY	4f) City			51.) T		State 4h) Zip Co	de
3.1 NOI ENT	14 5a) Map	Block Lot		describes the property leck any that apply	—Enter the code numb y being sold . (See instr :	ructions)—» 202	
	4 BARQUE			No tax maps ex Multiple parce			
	5c) Physical Location	KOAD	[Portion of parc			
6. TRANSFER TA	AX 6a) Purchase I	Price (If the transfer is a gift, e	nter "0")	ба	\$170,000		.00
	6b) Fair Marke	t Value (enter a value only if y		r [] 1
	if 6a) was of n			6b [.00
	6c) Exemption	claim – Check the box if eith	ier grantor or grantee is cl	aiming exemption	from transfer tax a	nd explain.	
		,					
10	31 2017		If the property is classified ial penalty could be trigge	l as Farmland, Ope ered by developme	n Space, Tree Growt ent, subdivision, par	th, or Working Wate rtition or change in	r- use.
MONTH	DAY YEAR					CLASSI	
SPECIAL CIRC in the transfer w	CUMSTANCES—Were the state of th	here any special circumstances orice paid was either more or less	10. INCOME			d to withhold Maine	9
	ket value? If yes, check			_	ncome tax because: qualified as a Maine		
		·		A waiver h	as been received fro	om the State Tax As	
				Considera Foreclosur		y is less than \$50,00)0
11. OATH	Aware of penalti	es as set forth by Title 36 §4641-	-K, we hereby swear or aff			return and to the h	est of
	our knowledge and	I belief, it is true, correct, and com	nplete. Grantee(s) and Gra	ntor(s) or their aut	horized agent(s) are	e required to sign be	elow:
	Grantee ESTAT	E OF ALICE W. CLARK	11/01/0017	TT A D ED L C C		Date11/01/	
12 DDCD4055	Grantee	Date	11/01/2017 Grantor			Date	2017
12. PREPARER	Name of Preparer	DIANE JACKSON			(207) 386-0400 Ex		
	Mailing Address	746 HIGH STREET		E-Mail Address _	djackson@hablaw.	com	_
		BATH, ME 04530		Fax Number _			

Merits: 0011796336005 Trips: 7173610220011

	12RETTD*	00	MAINE REVER REAL ESTATE TO DECLAI 36 M.R.S. 59	TRANSFER T			11/02/201 2017R Transfer Tax State of Main SAGADAHOC C	-0808! of 20020. e Transfer COUNTY MA	9 DD Tax AINE
2. Municipalit	y/Township						2017-	- 808	4
BATH					——————————————————————————————————————				
3. GRANTEE/	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	 				BOOK	PAGE—REGISTRY	USE ONLY	
PURCHASER	3a) Name LAST or BU SRMAC HO 3c) Name, LAST or BU	OLDING	, LLC				·		
	3e) Malling Address at 248 US F	fter purchase of HIGHWA	this property Y 202	***************************************	, , ,				
	LEEDS						ME 10	4265	
4. GRANTOR/ SELLER	4a) Name LAST or BUI KENNEBEC 4c) Name LAST or BUS	LAND	ING, LLC						
	4e) Mailing Address P.O. BOX	F 1 7	· · · · · · · · · · · · · · · · · · ·			· ·			
		512							
	BATH						4g) State ME	4h) ZIP Code) 4530	
5. PROPERTY	Sa) Map	Block	Lot	Sub-Lot	5b) Type of property	—Enter the c	ode number that be	nt	=
	20	<u> </u>	_, [93]		describes the proper Check any that apply		. (>ee instructions)—:	, 	
	Sc) Physical Location	map 20 L	ots 112 + 113		No tax maps e) Acreage	······································	_
	PARK STRE	EET Mo	P 14 Lot 96		Portion of pare	2		•	
6. Transfer ta	X 6a) Purchase	Price (lifthe	transfer is a gift, enter"		6a		4550	0,000	00
	6b) Fair Marke	et Value (ent	er a value only if you e	-	a.		1,000		==₹
	if 6a) was of n				6b	*******			.00
	6c) Exemption	claim –	Check the box if either gra	antor or grantee is	claiming exemption	from trans	fer tax and explain		
							·		
10-31 MONTH	NSFER (MM-DD-YYY) -2017 DAY YEAR	front	ARNING TO BUYER-If the a substantial financial per	nalty could be trig	igered by developmi	ent, subdivi	sion, partition or c	hange in use CLASSIFIE	
n the transfer w	UMSTANCES—Were to hich suggest that the p	price paid was	s either more or less	10. INCOM	ETAX WITHHELD-E	Buyer(s) not ncome tax i	required to withfu secause:	old Maine	
	et value? If yes, check				A waiver h Considera Foreclosur	as been rec tion for the resale	a Maine resident eived from the Sta property is less th	an \$50,000	
1.OATH	Aware of penaltic	es as set forti l belief, it is to	by 36 M.R.S. § 4641-K, when complete, correct, and complete.	ve hereby swear o	r affirm that we have	each exam	ined this return a	nd to the be	st of
	Grantee Pal	McF	Date 4-1	Grantee(s) and Granto		Norized age	nter and equired :	to sign belov - / →/!	<u>"</u> /"
	Grantee Mu	niger	Date	Granto			Date Date		_ '
2. PREPARER	Manie of Liebaids	Jessica R. Aver 280 Front Str			. Frione isomber	7-442-8781			-
	maing Appress -	Bath, Main			. Ciliali Auditess 🚣	a@sais-law			
Rev. 12/1:	-		w.maine.gov/revenue/p	ropertytax/transf		207-443-658 tm	·8		_,

Merits: 0011796332515 Trips: 7173610210031

(207)282-4310

Fax Number



MAINE REVENUE SERVICES **REAL ESTATE TRANSFER TAX** DECLARATION

11/02/2017 12:01 PM RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641 N 2017R-08104 1. County Transfer Tax of 554.40 State of Maine Transfer Tax Sagadahoc SAGADAHOC COUNTY MAINE 2. Municipality/Township 2017-8104 Bath BOOK/PAGE-REGISTRY USE ONLY 3. GRANTEE/ **PURCHASER** 3a) Name LAST or BUSINESS, FIRST, MI **NATHAN** RAMSAY R. Ic) Name LAST or BUSINESS, FIRST, MI 271 OLD ALFRED ROAD 3h) Zip Code 3f) City 3g) State ME 04046 ARUNDEL 4a) Name, LAST or BUSINESS, FIRST, MI 4. GRANTOR/ SELLER ROBERT A. PHILLIPS 4c) Name, LAST or BUSINESS, FIRST, MI 4e) Mailing Address 4h) Zip Code 4f) City 4g) State 5b) Type of property—Enter the code number that best Sa) Map Block Lot Sub-Lot 5. PROPERTY describes the property being sold. (See instructions)-39 24 Check any that apply: No tax maps exist 5d) Acreage 5c) Physical Location Multiple parcels 58 Washington Street Portion of parcel 6. TRANSFER TAX \$ 126,000.00 6a) Purchase Price (If the transfer is a gift, enter "0") 6a 6b) Fair Market Value (enter a value only if you entered "0" in 6a) or 6b if 6a) was of nominal value) Check the box if either grantor or grantee is claiming exemption from transfer tax and explain. 6c) Exemption claim -8. WARNING TO BUYER-If the property is classified as Farmland, Open Space, Tree Growth, or Working Water-7. DATE OF TRANSFER (MM-DD-YYYY) front a substantial financial penalty could be triggered by development, subdivision, partition or change in use. 10 2017 27 CLASSIFIED MONTH DAY YEAR 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances 10, INCOME TAX WITHHELD-Buyer(s) not required to withhold Maine income tax because: in the transfer which suggest that the price paid was either more or less Seller has qualified as a Maine resident than its fair market value? If yes, check the box and explain: A waiver has been received from the State Tax Assessor 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 11. OATH our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grantor(s) of their authorized agents) are required to sign below: Date 10:27-17 Grantor 100000 Date Grantee Date Grantor Grantee (207)282-7100 12. PREPARER Hull Law Office, LLC Phone Number. Name of Preparer closings@hulllawoffices.com 409 Alfred Street E-Mail Address Mailing Address Biddeford, Me 04005

SPR

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

DLN: 1001740017566

Registry	Sagadahoc
Date Recorded	11/03/2017
Time Recorded	03:22:00 PM
Transfer Tax Amount	\$396.00
Document Number	2017r-08164
Book	2017
Page	8164

<u>KE</u>	<u> עוו</u>	TITLE 36, M.R.S.A. SECTIONS §	§§4641-46	41N Transfe	er Tax Amount	\$396.00	
Sagadaho	oc						· .
1. County				Docu	ıment Number	201/r-0816	<u> </u>
BATH					Book	2017	
2. Municipality	/Township				Page	8164	
3. GRANTEE/					BOOK/PAGE—REG	STRY USE ONLY	
PURCHASER	BUBAR	SCOTT					
	3a) Name (LAST)	SCOTT (FIRST)		(MI)	3b) SSN or Feder	al ID	
				V/			
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	al ID	
	201 RIDGE	ROAD					
	3e) Mailing Address			J			 -
	BATJ				ME	04530	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	WELLS FAI	RGO BANK N.A					
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	al ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Federa	al ID	
	8950 CYPRI	ESS WATERS BLVD					
	4e) Mailing Address					_	
	COPPELL				TX	75019	
E DOODEDTY	4f) City				4g) Sta		de
5. PROPERTY	39	026 000	d	 b) Type of property—E lescribes the property be 			
	5a) Map	Block Lot Sub-Lot	t Che	eck any that apply: No tax maps exist			
	74 WASHIN	GTON ST		Multiple parcels	0.00		
	5c) Physical Location			Portion of parcel	5d) Acreage		
6. TRANSFER TA	X 6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a \$	90,000		.00
		et Value (enter a value only if you entered	"0" in 6a) or		70,000		
	if 6a) was of n		0 111 00) 01	6b			.00
	6c) Exemption	claim – Check the box if either grantor or	grantee is cla	aiming exemption fro	om transfer tay and	evolain	
	, , , , , , , , , , , , , , , , , , , ,		9.4.1000 13 010	aming exemption ne	m transier tax aria	ехріані.	
7 DATE OF TRA	NISTED (MANA DD VVVV	()					
	$ \begin{array}{c c} $	 8. WARNING TO BUYER-If the property front a substantial financial penalty cor 	y is classified uld be trigge	as Farmland, Open S red by development	pace, Tree Growth, , subdivision, partit	or Working Water ion or change in u	ıse.
MONTH	DAY YEAR					CLASSIF	
9. SPECIAL CIRC	UMSTANCES—Were th	here any special circumstances 1	0. INCOME T	AX WITHHELD - Buy	er(s) not required to	o withhold Maine	
in the transfer wi than its fair mark	hich suggest that the p set value? If yes, check	orice paid was either more or less the box and explain:			ome tax because: alified as a Maine re	scident	
	•	. Ц			been received from		essor
				Consideration	n for the property i		
11. OATH	Awaro of populti	or ac set fouth by Title 26 54641 V beauty		X Foreclosure S		1	
•/****	our knowledge and	es as set forth by Title 36 §4641-K, we hereby I belief, it is true, correct, and complete. Grante	swear or affi e(s) and Grar	rm that we have each ntor(s) or their author	n examined this ret rized agent(s) are re	urn and to the be equired to sign be	st of low:
		S FARGO BANK N.A _{Date} 11/06/201		SCOTT BUBA		_ Date11/06/2	2017
	Grantee		7 Grantor			Date 11/06/2	
12. PREPARER	Name of Preparer	WANDA BIENVENUE		Phone Number <u>(6</u>	03) 621-1553		
	Mailing Address .	70 MARKET ST		E-Mail Address <u>wl</u>	bienvenue@mssg.co	om	_
		MANCHESTER, NH 03101		Fax Number			

Merits: 0011796331911 Trips: 7173610210023



0599900 **RETTD**

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

11/06/2017 12:06 PM 2017R-08193

Transfer Tax of 1366,20 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE

1. COUNTY	DO NOT	USE RED INK!		CADALLOS COSIST INPAINE
SAGADA	7HOC		\vec{z}	2017-8193
2. MUNICIPALIT	TY/TOWNSHIP			
BATH			BOOM	VPAGE—REGISTRY USE ONLY
3. GRANTEE/ PURCHASER	30) Name (LAST, FIRST, MI) U. S. BANK, TRUST, NI 3c) Name (LAST, FIRST, MI) FOR LSF9 MASTER 1 3e) Mailing Address [380] WIRELESS WA	PARTICIPATIO	<u> </u>	3g) State 3h) Zıp Code
4. GRANTOR/ SELLER	4a' Name (LAST, FIRST, MI) LS. BANK TRUST, NI, 4c) Name (LAST, FIRST, MI) LS.F.9. MASTER PARTIC 4e) Masing Address	PATION TR	ee F	
	1380), WIRELETS, WA 41) City OK.AHOMA, CITY,	<u> </u>		4g) State 4h) Zip Code , 014 7.3, 134
5. PROPERTY	Sa) Map Block Lot 39 - 25 Sc) Physical Location 64 A. WASHINGTON S	 	k 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)
6.TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter	-"O")	6a \$ <u>, , , , , , , , , , , , , , , , , , </u>	.,3.10.,1.6.2.00
	6b) Fair Market Value (enter a value only if you if 6a) was of nominal value)	entered "0" in 6a) or	6b §	00
	6c) Exemption claim – Check the box if either o	grantor or grantee is claiming e	xemption from trans	fer tax and explain.
	7. DATE OF TRANSFER (MM-DD-YYYY) O9 19 2017. MONTH DAY YEAR	Tree Growth, a Substantii subdivision, partition or o	al financial penalty co change in use.	
9, SPECIAL CIRC which suggest th If yes, check the	UMSTANCES—Were there any special circumstances in the price paid was either more or less than its fair motox and explain:	10. INCC arket value?	A waiver has beer	Buyer(s) not required to withhold Maine income tax because: ed as a Maine resident n 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 our knowledge and belief, it is true, correct, and con Grantee Date Date	K, we hereby swear or affirm to applete. Grantee(s) and Granter() / / / / / Grantor Grantor	hat we have each exa s) of their authorized	prined this return and to the best of pent(s) are required to sign below: Date Date
12. PREPARER	Name of Preparer JOHNA . DOONAN,		one Number 97	8.921.2670
	Mailing Address 100 CUMMINGS C 136/ER-LY, MA	12, STE 2250 EN		DO DEANDL, COM

DLN: 1001740017577

Registry	Sagadahoc
Date Recorded	11/06/2017
Time Recorded	12:58:00 PM
ansfer Tax Amount	\$939.40
	2017 00011

DE	TTD	DECLARATI		Time Recorded	12:58:00 PM
		TITLE 36, M.R.S.A. SECTION	5 994641-4641N T	ransfer Tax Amount	\$939.40
Sagadah	oc			Document Number	
1. County					2017
BATH					
2. Municipality	y/Township			_	8219
3. GRANTEE/ PURCHASER				BOOK/PAGE—REG	ISTRY USE ONLY
FORCHASER	BOUTTEN			G	
	3a) Name (LAST)	(FIRST)		MI) 3b) SSN or Fede	ral ID
	BOUTTEN(3c) Name (LAST)	OT RACHEL (FIRST)		E Jah SSN or Fede	I ID
	10 HAWTH	RORNE LANE		MI) 3d) SSN or Fede	rai ID
	3e) Mailing Address				
	LEWISTON	T 1		ME	04240
4. GRANTOR/	3f) City			3g) State	3h) Zip Code
SELLER	BURNS	AMY	j	ſ	
	4a) Name (LAST)	(FIRST)	()	MI) 4b) SSN or Feder	al ID
	4c) Name (LAST)	(FIRST)		(AD)	
	660 HIGH S			MI) 4d) SSN or Feder	al ID
	4e) Mailing Address	TICET			
	BATH			ME	04530
	4f) City			4g) Sta	
5. PROPERTY	28	1		erty—Enter the code number	that best
	5a) Map	Block Lot Sub-	Chock any that ar	perty being sold . (See instruc oply:	tions)—» 220
	660 HIGH S	TREET, BATH, ME 04530	No tax man		
	5c) Physical Location	TREE1, BATH, ME 04530	Portion of p		
6. TRANSFER TA	AX 6a) Purchaso	Price (If the transfer is a gift, enter "0")			00
			6	\$213,120	.00
	if 6a) was of n	et Value (enter a value only if you entere ominal value)	ed "U" in 6a) or 61	0	.00
	6c) Exemption	claim – Check the box if either grantor			
	,,	creat the Box in clutter granton	or grantee is claiming exempl	ion nom transier tax and	explain.
7 DATE OF TRA	ANGEED (MANA DE 1900				
11	03 2017	8. WARNING TO BUYER-If the proper front a substantial financial penalty	erty is classified as Farmland, (could be triggered by develor	Open Space, Tree Growth, oment, subdivision, partit	or Working Water- tion or change in use
MONTH	DAY YEAR		33 , , , , , , , , , , , , , , , , , ,	,	CLASSIFIED
9. SPECIAL CIRC	UMSTANCES—Were t	here any special circumstances	10. INCOME TAX WITHHELD)- Buyer(s) not required t	o withhold Maine
n the transfer w than its fair mar	/hich suggest that the ket value? If yes, check	orice paid was either more or less the box and explain:	▼ Soller I	income tax because: nas qualified as a Maine re	ncidon#
	•			er has been received fron	
			Consid	leration for the property i	
11. OATH	Aware of nenalti	os as set forth by Title 26 84641 K I I		osure Sale	
	our knowledge and	es as set forth by Title 36 §4641-K, we herel I belief, it is true, correct, and complete. Gran	ענ swear or amrm that we hav itee(s) and Grantor(s) or their	ve eacn examined this ret authorized agent(s) are re	urn and to the best of equired to sign below:
	Grantee AMY J	BURNS Date 11/06/20	017 Grantor KATHER	INE G BOUTTENO	T _{Date} 11/06/2017
	Grantee	Date	017 Grantor RACHEL	E BOUTTENOT	Date _11/06/2017
12. PREPARER	Name of Preparer	RILEY GRAVES		er(207) 553-2190	
	Mailing Address	75 MARKET STREET	E-Mail Addres	s riley@treworgy-balda	acci.com
	,	PORTLAND, ME 04101	Fax Number		

Merits: 0011796334228 Trips: 7173610210057

204-442-7784

Fax Number

_	.2rettd*	REAL ESTA	VENUE SERVICES TE TRANSFER TA LARATION SECTIONS 554641-4	x		2017F	017 2:47 PM R-08239 Tax of 528,00 ne Transfer Ta	
1. County	1100	·					COUNTY MAIN	
SAGADA						2	0220	
2. Municipality	/Township		***************************************			2017-	. 8237	
BATH		-			BOOKI	PAGE—REGISTR	VIISE ONI V	
3. GRANTEE/ PURCHASER	3a'Name LAST of BUSINESS	FIRST.MI DENNTS		<u> </u>				
	3c) Name, LAST or BUSINESS				F			
	42 MECHANI	C STREET						
	3f) City BATH					ME	04530	\neg
4. GRANTOR/	4a' Name, LAST or BUSINESS					(
SELLER	DEMPSEY, SF				L			
	DEMPSEY, J		•					
	4e) Mailing Address							
	337 HUDSON	HTTT KD						
	4f) Gly HUDSON					40) State ME	4h) Zip Code 0 4 4 4 9	\neg
5. PROPERTY	5a) Map	Block Lat	Sub-Lot	5b) Type of property-	-Enter the	code number tha	tbest 10.01	<i>-</i>
	20	26	51	describes the property Check any that apply:	_	d. (See Instruction	201	
	5c) Physical Location			No tax maps ex	ist	id) Acreage	·	
	42 MECHANIC	C STREET, B	ATH	Multiple parcel Portion of parce			.15	
6.TRANSFERT	AX 6a) Purchase Pric	e (If the transfer is a gift,	enter*0")	6a		1:	20000	.00
	-	olue (enter a value only i	-	or L				
	if 6a) was of nom			6b				.00
	6c) Exemption clai	m - Check the box if e	ither grantor or grantee is	claiming exemption	from tra	nsfer tax and ex	piain.	
	ANSFER (MM-DD-YYYY)		R-If the property is classifi ncial penalty could be trig				n or change in us	
MONTH O SUBCIAL CIR	DAY YEAR	any special circumstances	10.INCOM	IETAX WITHHELD-E	lisver(s) n	ot required to u	L CLASSIFII	:U
in the transfer v		e paid was either more or l		i	ncome ta	x because: as a Maine resi		
tianits ian ma	inet value: II yes, crieck the	Dux and explain		<u></u>	•		ne State Tax Asse:	ssor
				Considera Foreclosur		he property is l	ess than \$50,000	
11. OATH	Aware of penalties	as set forth by Title 36 §46	41-K, we hereby swear or	affirm that we have e	each exar	nined this retur	n and to the best	t of
	our knowledge and be Grantee	eller, it is true, correct, and c	121/21/AN-		ingrized :	agent(s) are requ	Date 0/3/	w: ///
	Grantee	Da Da		100	oth	_/"_	Date <u>/0/3/</u>	<u>[[</u>
12. PREPARER	Mame of Preparer	v Office of James F. Day		Phone Number_	07-442-77	*****	, ,	
_	Mailing Address 52	Front Street		_ E-Mail Address	im@day	เฉพากเกิ		

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

Bath, Maine 04530

Merits: 0011796333932 Trips: 7173610210065



0599900 **RETTD** 00

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

11/06/2017 2:55 PM

2017R-08243

Transfer Tax of 730,40
State of Maine Transfer Tax
SAGADAHOC COUNTY MAINE

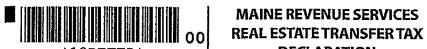
1.COUNTY	DO NOT USE RED INK!	
SAGADA		2017-8243
2. MUNICIPALI		
BATH		OK/PAGE—REGISTRY USE ONLY
3. GRANTEE/ PURCHASER	BEATON, FRANCIS C., SR	
	3c) Name (LAST, FIRST, MI)	
	3el Mailing Address 149 NORTH STREET	t testantantum
	BATH	3g) State 3h) Zip Code ME 04530
4. GRANTOR/ SELLER	49) Nome (LAST, FIRST, MI) LEMOINE, RICHARD S.	
	4c) Name (LAST, FIRST, MI) LEMOINE, JUDITH H.	
·	4e) Mailing Address 149 NORTH STREET	
	4f)City BATH	4g) State 4h) Zip Code ME 04530
5. PROPERTY	Sa) Map Block Lot Sub-Lot Check any that apply:	5b) Type of property—Enter the code number that best describes the property being sold. (See instructions)
	Sc) Physical Location No tax maps exist	5d) Acreage:
	149 NORTH STREET Multiple parcels Portion of parcel	an action
6. TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter "0")	000,- 187500 .00
	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value)	.00
	6c) Exemption claim – Check the box if either grantor or grantee is claiming exemption from trar	ısfer tax and explain.
	7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the property is cla	essified as Farmland. Open Space or
	Tree Growth, a Substantial financial penalty of subdivision, partition or change in use.	
which suggest th	UMSTANCES—Were there any special circumstances in the transfer 10. INCOME TAX WITHHELD not the price paid was either more or less than its fair market value?	Buyer(s) not required to withhold Maine income tax because:
If yes, check the I	Y Serier rias quaim	ied as a Maine resident
		en received from the State Tax Assessor
11. OATH		or the property is less than \$50,000
11. UAII	Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear or affirm that we have each experience our knowledge and belief, it is true, correct, and complete. Grantee(s) and Granter(s) of their authorize	d agent(s) are required to sign below:
	Joseph Committee of the	<u> Mr Date 11.3.17</u>
	Grantee Date Grantor	Date
12. PREPARER	restance in the part in the pa	7-443-1333
	Mailing Address 839 Washington Street E-Mail Address join Bath, ME 04530	hn@voorheeslaw.com

DLN: 1001740017594

Registry	Sagadahoc
Date Recorded	11/07/2017
Time Recorded	10:43:00 AM
nsfer Tax Amount	\$902.00
Ocument Number	2017r-08252

RE'	TTD	TITLE 3	6, M.R.S.A. SI	ECTIONS §§4	541-46	41N			Recorded			<u>M</u>
							Tran	sfer Tax	x Amount	\$902.00)	
Sagadaho	oc					i 1 1 1 1 1	D	ocumen	t Number	2017r-0)825	2
					 -				Book	2017		
BATH			·						•	8252		
2. Municipality	//Township		·					BOOK	. PAGE—REGI/		NIV	
3. GRANTEE/ PURCHASER						L		BOOK F	/ I AGE—REG	31K1 03L 0	INLI	
TORCHASER	GILSON 3a) Name (LAST)		MATTHE (FIRST)	ΞW			A (MI)	31	o) SSN or Feder	al ID		
	GILSON 3c) Name (LAST)		CHRISTI	NA			M (MI)	30	d) SSN or Feder	aLID		
	13 DIKE RC)AD					, ,	30	,, 5514 0, 1 cach	ar ib		
	1											_
	BATH								ME	0453		
4. GRANTOR/	3f) City								3g) State	3h) Zip	Code	
SELLER	GREEN 4a) Name (LAST)		HILDEG2 (FIRST)	ARD			(MI)	4b	o) SSN or Federa	al ID		
	4c) Name (LAST)		(FIRST)				(MI)	40) SSN or Federa	aliD		
	14 BULL RO	OAK ROAD							,, 55,11 61 1 646,1			
	4e) Mailing Address											
	BRUNSWIC	ĽK				•••			ME	0401	1	\neg
	4f) City		· · · · · · · · · · · · · · · · · · ·			****			4g) Sta		Zip Code	
6. TRANSFER TA	5a) Map 48 DUMME 5c) Physical Location X		Lot	Sub-Lot		eck any No ta Mult	that appl ax maps e iple parce on of par	y: exist els cel	0.19 5d) Acreage		201	
		Price (If the transf					6a	\$205,	000			.00
	6b) Fair Marke if 6a) was of n	t Value (enter a v ominal value)	alue only if yo	ou entered "0" i	n 6a) or	•	6b					.00
	6c) Exemption	claim – Check	the box if eithe	r grantor or gran	tee is cla	aiming e	exemptio	n from trai	nsfer tax and	explain.		
11 MONTH	NSFER (MM-DD-YYYY) 06 2017 DAY YEAR	front a subs	tantial financia	the property is c Il penalty could b	e trigge	red by c	levelopm	ent, subdi	vision, partit	ion or chang	ge in us ASSIFI	se.
 SPECIAL CIRC in the transfer w 	UMSTANCES—Were the hich suggest that the p	nere any special ciro price paid was eithe	r more or less	10. IN	COMET	AX WIT			ot required to x because:	o withhold A	Maine	
	ket value? If yes, check						Seller has A waiver l	qualified has been r ation for th	as a Maine re eceived from ne property is	the State Ta		
11. OATH	Aware of penaltic	es as set forth by T	i tle 36 §4641-K	, we hereby swe	ar or affi	rm that	we have	each exan	nined this ret	urn and to t	he hes	t of
	our knowledge and	l belief, it is true, co GARD GREEN	rect, and comp	olete. Grantee(s)	and Gran	ntor(s) o	r their au	thorized a	gent(s) are re	quired to si	gn belo	ow:
	Grantee		Date	11/07/2017	arantor Grantor	CITE		A M GIL		_ Date		
12. PREPARER	Name of Preparer	LYNN BILODE	Date _				Number_	(207) 87		_ pate		
	Mailing Address .	70 CENTER STE					Address .		nclaughlintitle	e.com		_
		PORTLAND, MI				Fax Nu						

Merits: 0011796334437 Trips: 7173610210075



12RETTD	DECLARATION 36 M.R.S. §§ 4641-4641N	1	712017 10:38AM
1. County		<i>2</i> 0	017 R-08290
SAGADAHOC	- , - :		Transfer Tax of OOC te of Maine Transfer Tax
2. Municipality/Township		SAG	ADAHOC COUNTY MAINE
BATH	•	.]	(2017 - 8290)
3. GRANTEE/		BO	OK/PAGE—REGISTRY USE ONLY
PURCHASER 3a) Name LAST or BUSINESS, FIR JONES GRIFF 3c) Name LAST or BUSINESS, FIR JONES JOANN	ITH M JR.		
3et Malling Address after purcha 1077 WASHING	se of this property		
3f) City BATH			3g) State 3h) ZIP Code ME 04530
4. GRANTOR/ SELLER 4. Name, LAST or BUSINESS, FIR 4. Name, LAST or BUSINESS, EIR 4. Name, LAST or BUSINESS, EIR 4. Name, LAST or BUSINESS, EIR 4. Mailing Address 1077 WASHING	SLML		
4f)CityBATH			4g) State 4h) ZIP Code ME 04530
5a) Map Blox 21 5c) Physical Location 1077 WASHING	195	5b) Type of property—Enter describes the property being theck any that apply: No tax maps exist Multiple parcels Portion of parcel	the code number that best sold. (See instructions)—> 5d) Acreage 0 16
6. TRANSFER TAX 6a) Purchase Price (If	the transfer is a gift, enter "0")	6a	.00.
	(enter a value only if you entered "0" in 6a)	, ,	298000.00
6c) Exemption claim -	Check the box if either grantor or grantee is	claiming exemption from	transfer tax and explain.
transfer between spouses			
7. DATE OF TRANSFER (MM-DD-YYYY) 11-07-2017 MONTH DAY YEAR	8. WARNING TO BUYER-If the property is classific front a substantial financial penalty could be trig	gered by development, su	bdivision, partition or change in use. CLASSIFIED
9. SPECIAL CIRCUMSTANCES—Were there any in the transfer which suggest that the price pa than its fair market value? If yes, check the box	id was either more or less	income	s) not required to withhold Maine e tax because: led as a Maine resident
transfer betwee	en spouses	A waiver has bee	en received from the State Tax Assessor or the property is less than \$50,000
11. OATH Aware of penalties as se our knowledge and belief. Grantee Grantee Grantee	t forth by 36 M.R.S. § 4641-K, we hereby swear of it is true, correct, and complete. Grantee(s) and G Date 1/7/17 Grantee Grantee	rapter(s) or their authorize	examined this return and to the best of dagent(s) are required to sign below: Date
12. PREPARER Name of Preparer E. ANNE	CARTON ESO.	Phone Number 207-725	-0600
Mailing Address	ON STRĚET		ECARTON@GMAIL.COM
BRUN	ISWICK, ME 04011	Fax Number 207-72	25-0606

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

Fax Number

Merits: 0011796334336 Trips: 7173610210073



12RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

11/09/2017 11:27 AM

RET	rtd .	TITLE 36, M.R.S.A. SECTIONS \$94641-4	641N	2017R-08296
1. County				Transfer Tax of 110.00 State of Maine Transfer Tax
Sagadahoc	,		s	agadahoc county maine
2. Municipality/	Township			2017-8296
Bath			700/	INACE DECICTOVILLE ONLY
3. GRANTEE/ PURCHASER			BOOK	/PAGE—REGISTRY USE ONLY
PORCHASER	3a) Name LAST or BUSINESS.	FIRST, MI. BEN	F.	
	BARKER 3r) Name, LAST OF RUSINESS.			
	BARKER	MARGARET	S.	
	3e) Malling Address 1023 MIDDLE S	TREET		
	3f) City			3g) State 3h) Zip Code
	BATH			ME 04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINESS			
Serren	4c) Name, LAST or BUSINESS	ENE F. STEVENS		
	4e) Mailing Address			
	285 PITTSTON	ROAD		
	4f) City			4g) State 4h) Zip Code
	WHITEFIELD			ME 04357
5. PROPERTY	5a) Map	Block Lot Sub-Lot	5b) Type of property—Enter the describes the property being se	e code number that best
	21	48	theck any that apply:	NATIONAL DECEMBER OF THE PARTY
	Sc) Physical Location	Creation (Control Control Cont	No tax maps exist	5d) Acreage
	84 Pearl Street		Multiple parcels Portion of parcel	
6. TRANSFER T/	AX		ба	\$ 25,000.00
	6a) Purchase Pric	e (If the transfer is a gift, enter "0")	<u> </u>	\$ 25,000.00
	6b) Fair Market Vi if 6a) was of nom	alue (enter a value only if you entered "0" in 6a inal value)	6b	
	6c) Exemption clai		claiming exemption from tr	ansfer tax and explain.
7 DATE OF TR	ANSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the property is classi	ed as Farmland, Open Space	, Tree Growth, or Working Water-
	3 2017	front a substantial financial penalty could be tri	gered by development, sub	division, partition or change in use. CLASSIFIED
МОИТН	DAY YEAR	10 INCOL	IE TAY WITHHEI D. Ringarie)	not required to withhold Maine
in the transfer	which suggest that the price	e paid was either more or less	income	tax because:
than its fair ma	arket value? If yes, check the	box and explain:		d as a Maine resident received from the State Tax Assessor
				the property is less than \$50,000
			Foreclosure Sale	•
11. OATH	Aware of penalties	as set forth by Title 36 \$4641-K, we hereby swear of	affirm that we have each ex	amined this return and to the best of
	• • • • • •	ellef, it is true, correct, and complete. Grantee(s) and Date 11-3-17 Grant		Date 11-3-2017
	Grantee Music	Date 1/3/17 Gran	*	Date
12. PREPARER		entral Maine Title Company, Inc.		622-7505
	manie or repair.	Winthrop Street, Augusta, ME 04330	E-Mail Address	
			Fax Number	
SPR		http://www.maine.gov/revenue/propertytax/tra	siertax/transfertax.ntm	

Merits: 0011796335244 Trips: 7173610210089



		li 00		TETRANSFE	K IAX	// .	14,2017	1.05P	8.8
	2RETTD*	-	TLE 36, M.R.S.A		.641-4641N	" "	772077	かりしょし	141
1. County			1 11 30, 141213171	. 560 110115 35 .	077 101111	∤ ć	2017 R-	_	0.0
SAGADAI	IOC					St	Transfer ate of Maine	Transfer Tax	ζ
2. Municipality/	Township					SAC	ADAHOC CO	NIEW ALUNC	
BATH					1		(2017	-8414)	
3. GRANTEE/						80	OKPAGE—REGISTR	Y USE ONLY	
PURCHASER	3a) Name LAST or BUSH NEWMAN, 3c) Name LAST or BUSH Newman 3e) Mailing Address 997 MIDD	HARRY NESS, EIRST, A	<u>. C.</u>				<u>-</u> -		
	36) City BATH						ME	04530	
4. GRANTOR/ SELLER	4a),Name,LAST,or,BUSI NEWMAN, 4c),Name,LAST,or,BUSI	HARR	<u>C.</u>				 : [_
	4e) Mailing Address 1997 MIDD 4f) City BATH	LE ST	REET				4g) State ME	4h) Zip Code 0 4 5 3 0	- ,
5. PROPERTY	21 5c) Physical Location 997 MIDDI	Block E ST		Sub-Lot	descrii Check a ¯ ¦ N N		er the code number that g sold, (See instructions 5d) Acreage		•
6. TRANSFER TA	X Ca) Developed	D-100 /16+lo	e transfer is a gift	onter#0"\		ба	- 	0.0	00.
		et Value (e	nter a value only		"in 6a) or	6b	10	<u>.</u>	ָ סס
	6c) Exemption	claim !	Check the box if	either grantor or gr	antee is claimi	ng exemption from	n transfer tax and exp	plain.	
To place pr	operty in joint	tenancy	between fath	er and daught	er				!
7. DATE OF TRA	NSFER (MM-DD-YYY) 0-2017	Y) 8.1	WARNING TO BUYE	R-If the property is	classified as F	armland, Open Sp by development, s	ace, Tree Growth, or subdivision, partition	Working Water- or change in use. CLASSIFIED	
in the transfer w	UMSTANCES—Were the which suggest that the ket value? If yes, check	price paid was the box an	was either more or l d explain:	ess	, !; , .	incon ✓ i Seller has qual A waiver has be Consideration Foreclosure Sa		dent ne State Tax Assesso nss than \$50,000	
11. OATH	Aware of penalt our knowledge an Grantee	ties as set fo d belief it is	true, correct, and o	complete. Grantee(ate <u>11/9/17</u>	s) and Granton Grantor 4	(s) or their authoriz		ired to sign below Date <u>///</u> 9//~	if 1: Z
12 DDEDADED	Grantee	John W. Vo		ite	Grantor	12071	143-1333	Date	_
12. PREPARER	Name of Preparer		ington Street			Olie Manipei	@voorheeslaw.com		-
	Mailing Address		E 04530			viali Addiess) 443-2273	*	
_				evenue/propertyta					

PROCESSED ONLINE.

DLN: 1001740017750

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

Registry	Sagadahoc	
Date Recorded	11/14/2017	
Time Recorded	02:59:00 PM	
fer Tax Amount	\$66.00	

JONOI.	RE-PROCESS.	DECLARATIO	N		Time Recorded	02:50:00 P	
RE'	TTD	TITLE 36, M.R.S.A. SECTIONS	§§4641-4641N	Tron	sfer Tax Amount		101
Sagadaho	oc .						10
1. County				De	ocument Number		18
BATH						2017	+
2. Municipality	/Township				Page	8418	
3. GRANTEE/					BOOK/PAGE—REC	SISTRY USE ONLY	
PURCHASER	CITY OF BATH						
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Fede	eral ID	
	3c) Name (LAST)	(FIRST)] (MI)	3d) SSN or Fede	eral ID	
	55 FRONT ST. 3e) Mailing Address						
	BATH				ME	04530	
	3f) City				3g) State		
4. GRANTOR/ SELLER	DEUTSCHE BA	NK NATIONAL TRUST (COMPANY.	AS TRI	JSTEE FOR A	MERIOUES	ST MORTG
	4a) Name (LAST)	(FIRST)	,	(MI)	4b) SSN or Fede		
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Fede	ral ID	
	4e) Mailing Address	GTON ROAD SUITE 100	· · · · · · · · · · · · · · · · · · ·				
		EACII				22400	
	WEST PALM BE	EACH			FL 49) \$1	33409 4h) Zip Co	ode
5. PROPERTY		042			Enter the code number	er that best	
	21 Blo	ock Lot Sub-Lo	Chackan	es the propert ny that apply	ty being sold . (See instru y:	ctions)—» 202	
	22 WILLOW ST		————	tax maps e ultiple parce			
	5c) Physical Location	REET, BATH, ME 04530-	Poi	rtion of parc	1 1.00		
6. TRANSFER TA	X	f the transfer is a gift, enter "0")		62	\$30,000		00.
		e (enter a value only if you entered	d"0" in 6a) or	6a	\$30,000] .00
	if 6a) was of nomina		ı O III da) Oi	6b			.00
	6c) Exemption claim -	Check the box if either grantor o	r grantee is claiming	exemption	n from transfer tax an	d explain.	_
						·	
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the proper	ty is classified as Far	rmland One	en Space Tree Growth	or Working Wate	er-
10	26 2017	front a substantial financial penalty co					
MONTH	DAY YEAR					CLASS	
	CUMSTANCES—Were there are related to the control of		10. INCOME TAX W		Buyer(s) not required income tax because:	to withhold Main	е
than its fair marl	ket value? If yes, check the bo	x and explain: \overline{X}	F	⊣	qualified as a Maine		
NIA			-	_	nas been received fro ation for the property		
NA				Foreclosu	re Sale		
11. OATH		et forth by Title 36 §4641-K, we hereby, it is true, correct, and complete. Grant					
		BANK NATIONAL TRIUSTZO					
	Grantee	Date 11/14/20				Date	
12. PREPARER	Name of Preparer <u>ROI</u>	BERT BURBACK		e Number_	(770) 956-5803		<u>-</u>
	Mailing Address 2002	2 SUMMIT BLVD	E-Ma	il Addross	Robert.burback@alt	isource.com	

_ Fax Number _

ATHENS, GA 30319

Merits: 0011796328117 Trips: 7173610200035



RETTD

MAINE REVENUE SERVICES **REAL ESTATE TRANSFER TAX** DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

11/15/2017 11:58 AM 2017R-08440

Transfer Tax of 1447.50 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE

2017-8440

DO NOT USE RED INKI . COUNTY Sagadahoc . MUNICIPALITY/TOWNSHIP 3a) Name (LAST, FIRST, MI) Stuitz, Michael L 3c) Name (LAST, FIRST, MI)

BOOK/PAGE-REGISTRY USE ONLY Bath . GRANTEE! 3b) SSN or Federal ID **PURCHASER** 3e) Mailing Address 20 Patricia Road 3g) State 3h) Zip Code Brunswick, ME 04011 4. GRANTOR/ 4a) Name (LAST, FIRST, MI) SELLER Brill, Kenneth A. 4c) Name (LAST, FIRST, MI) Brill, Kathryn H. le) Mailing Address 702 Washington Street 4h) Zip Code if) City 4g) State Bath ME 04530 5b) Type of property—Enter the code number Man Block Lot Sub-Lot Check any that apply: 5. PROPERTY that best describes the property being sold. 165 27 (See instructions) ☐ No tax maps exist Multiple parcels 5c) Physical Location 5d) Acreage: portion of parcel 702 Washington Street, Bath, ME 04530 6, TRANSFER \$329,000.00 TAX 6a 6a) Purchase Price (If the transfer is a gift, enter"0") 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 from transfer tax and explain. 8. WARNING TO BUYER- If the property is classified as Farmland, Open Space or Tree 7. DATE OF TRANSFER (MM-DD-YYYY) Growth, a Substantial financial penalty could be triggered by development, subdivision, November 14, 2017 partition or change in use. MONTH DAY CLASSIFIED 10. INCOME TAX WITHHELD- Buyer(s) not required to withhold 9. SPECIAL CIRCUMSTANCES - Were there any special circumstances in the transfer which Maine Income tax because: suggest that the price paid was either more or less than its fair market value? If yes, check the box and explain: ☐ 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 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 11. OATH proceed, and composete. Grantee(s) and Grantor(s) or their authorized agent(s) are required to sign below: /Grantor Grantee 12. PREPARER Phone Number (207) 775-5900 Name of Preparer Bay Area Title Services Mailing Address 1711 Congress Street, Portland ME 04102

Merits: 0011796328418 Trips: 7173610200037



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

11/15/2017 12:19 PM

KE	עוו	111LE 36, M.	.R.S.A. SECTIONS 994	1041-464	HIN	2	2017R-08	444
1. County	700					Sta	Fransfer Tax of 4 Ite of Maine Tran	ısfer Tax
SAGADA	HOC					SAG	ADAHOC COUNT	Y MAINE
2. Municipality	Township				_,	•	2017-9	४५५५
BATH			and the second s					
3. GRANTEE/ PURCHASER						BOOK/	Pageregistry	USE ONLY
T ONCIN DEN	ROLFE, J	NESS, FIRST, MI ONATHAN E .	_			1		
	3c) Name LAST or BUSI	NESS, FIRST, MI				J 7		
		ELEN E.						
	3e) Mailing Address 68 RICHA	RDSON STRE	EET					
	3f) City BATH							3h) Zip Code 0 4 5 3 0
4. GRANTOR/	4a) Name, LAST or BUSI	NESS, FIRST, MI						
SELLER		CRYSTAL R.	•					
	4c) Name. LAST or BUSI	NESS, FIRST, MI				7		
	<u>L</u>					j		
	4e) Mailing Address			, , , , , , , , , , , , , , , , , , , 			1	
	4f) City						4g) State	4h) Zip Code
	1,7,5,9							
	Es) Mas	Block	Lot Sub-Lot		h) Time of monorth	l	çode number that b	
5. PROPERTY	5a) Map 31	- I -	46	d	lescribes the proper	ty being sol	J. (See instructions)-	
	L 1				eck any that appl No tax maps o		d) Acreage	
1	5c) Physical Location 68 RICHAF	RDSON STRE	ET	- [Multiple parc	1		
- 70 114 17 17 17					Portion of par	cei		
6.TRANSFERTA	ба) Purchase	Price (If the transfer is	a gift, enter "0")		6а		11	1500 .00
		et Value (enter a value iominal value)	only if you entered "0	" in 6a) or	r 6b			.00
	6c) Exemption	claim - Check the	box if either grantor or gr	antee is cla	i aiming exemptio	n from trar	sfer tax and expl	ain.
	NSFER (MM-DD-YYY		BUYER-If the property is					
	3-2017	front a substant	tial financial penalty could	d be trigge	ered by developn	nent, subdi	vision, partition o	or change in use. CLASSIFIED
9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were 1	there any special circums	stances 10.	INCOMET	rax withheld-	·Buyer(s) n	ot required to wit	
in the transfer v		price paid was either mo			Seller ha		x because: as a Maine reside	nt
grant to just the			304	1	=	•		State Tax Assessor
					Consider Foreclose		ne property is less	than \$50,000
11. OATH			36 §4641-K, we hereby sv		irm that we have	each exan		
	LAST	d belief it is true, correct	t, and complete. Grantee(s) and Gra Grantor	11	ithorized a	};'A	red to sign below: ate 111313
	Grantee Kelen	E-Ro-4e	Date	Grantor	001	<u> </u>		ate
12. PREPARER	Name of Preparer	Stewart Title Company			Phone Number	603-427-28		
•	Mailing Address	110 Corporate Drive Su			E-Mail Address		y@stewart.com	
		Portsmouth, NH 03	3801		Fax Number	603-427-2	2820	

DLN: 1001740017789

Registry	Sagadahoc
Date Recorded	11/16/2017
Time Recorded	11:51:00 AM
Transfer Tax Amount	\$583.00
Document Number	2017r-08471
Book	2017

KE	עוו	TITLE 36, M.R.S.A. SECT	ONS §§4641-4641N	Transfer	Tax Amount	\$583.00	
Sagadaho	oc				-		
1. County				Docu	ment Number _	201/r-084	<u>/1</u>
BATH				1	Book _	2017	
2. Municipality	v/Township				Page	8471	
3. GRANTEE/	,,		· .	┥ :	OOK/PAGE—REGIS	STRY USE ONLY	
PURCHASER	DUDDOWG	THOMAC					
	BURROWS 3a) Name (LAST)	THOMAS		(MI)	3b) SSN or Federa	LID	
		, ,		()	35) 331V 01 T C C C C		
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Federa	LID	
	470 MOUN	TAIN RD					
	3e) Mailing Address						
	HARPSWE	LL			ME	04079	
4.65	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	DS PROPER	RTIES ONE LLC					
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Federa	IID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Federa	IID	
	PO BOX 78	72					
	4e) Mailing Address					1 	
	PORTLANI)			ME	04112	
5. PROPERTY	4f) City				4g) Stat		de
J. HOI ERIT	38	18	describ	oes the property bei	ter the code number t ng sold . (See instructi	ons)—» 202	
	5a) Map	Block Lot	SUD-LOT	ny that apply: o tax maps exist			
	178 WASHI	NGTON ST		Iultiple parcels	0.22		
	5c) Physical Location			ortion of parcel	5d) Acreage		
6. TRANSFER TA	4X 6a) Purchase I	Price (If the transfer is a gift, enter "C)")	6a \$1	32,500		.00
	6b) Fair Marke	et Value (enter a value only if you er	ntered "0" in 6a) or] · · · · · · · · · · · · · · · · · · ·
	if 6a) was of n		,	6b			.00
	6c) Exemption	claim – Check the box if either gra	ntor or grantee is claimin	g exemption fror	n transfer tax and e	explain.	-
		_				•	
7. DATE OF TRA	ANSFER (MM-DD-YYY)	Y) 8. WARNING TO BUYER-If the p	roperty is classified as Es	ermland Onen Co	assa Tran Crowth		
11	15 2017	front a substantial financial pen	alty could be triggered b	y development, :	subdivision, partiti	or working watei on or change in i	r- use.
MONTH	DAY YEAR					CLASSII	FIED
9. SPECIAL CIRC	UMSTANCES—Were t	here any special circumstances	10. INCOME TAX V			withhold Maine	
than its fair mar	ket value? If yes, check	price paid was either more or less the box and explain:	F	_	ne tax because: lified as a Maine res	sident	
					een received from		essor
					for the property is	less than \$50,00	0
11. OATH	Aware of nepalti	es as set forth by Title 36 §4641-K, we	hereby swear or affirm th	Foreclosure Sa	· -	ura and to the 1	on of
	our knowledge and	d belief, it is true, correct, and complete.	Grantee(s) and Grantor(s	s) or their authori	zed agent(s) are red	quired to the be	est or elow:
	Grantee DS PRO	OPERTIES ONE LLC Date 11/1		HOMAS BUR	ROWS	Date 11/16/	
	Grantee	Date .	6/2017 Grantor			. Date11/16/	2017
12. PREPARER	Name of Preparer	MARK WALTZ	Pho		7) 798-4611		
	Mailing Address	PO BOX 177			w@cascobaytitle.c	om	
		BRUNSWICK, ME 04011	Fax	Number			

Merits: 0011796328520 Trips: 7173610200041

1. County	·	REAL ESTATE DECLA	NUE SERVICES TRANSFER TAX ARATION 6 4641-4641N	//	2017 R- Transfe State of Mains SAGADAHOC O	Tax of Transfer Tax OUNTY MAINE - 8475)
3. GRANTEE/ PURCHASER	3c) Name, LAST or BUSINESS, 3e) Mailing Address after pur 3f) City BATH	F_House TR FIRST MI chase of this property age House L			BOOK PAGE—REGISTR	04630
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINESS MARCA 4ct Name, LAST or BUSINESS 4e) Malling Address 4e) CA-RA 4f) City BATH	JUANNE D	LANE		4g) State M E	4h) ZIP Code
5. PROPERTY	5a) Map 20 5c) Physical Location	Block Lot	d		}	
6. TRANSFER TA	6a) Purchase Price 6b) Fair Market Va if 6a) was of nomi	(if the transfer is a gift, enter use (enter a value only if you nal value)	u entered "0" in 6a) or	6b	222, 500 om transfer tax and exp	.00.
MONTH 9. SPECIAL CIRC in the transfer w	NSEER (MM-DD-YYYY) 25 17 DAY YEAR CUMSTANCES—Were there hich suggest that the price ket value? If yes, check the t	paid was either more or less	penalty could be trigger	AX WITHHELD – Buy inc Seller has qu A waiver has	yer(s) not required to wi orne tax because: alified as a Maine reside been received from the on for the property is les	or change in use. L. CLASSIFIED thhold Maine ent State Tax Assessor
11. OATH 12. PREPARER	our knowledge and beli Grantee	set forth by 36 M.R.S. § 4641- ef, it is true, correct, and complete the set of the set	lete. Grantee(s) and Grant 18/17 Grantor Grantor	ntor(s) gr their autho	orized agent(s) are requir	m and to the best of red to sign below: ateate
Rev. 12/1	Name of Preharer 41 Mailing Address 48	// Washing-fon ATH ME 00453 http://www.maine.gov/revenu	<i>5</i> †	Phone Number Email Address Fax Number tax/transfertax.htm	2 Horney Marso 17-567	,

DLN: 1001740017812

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry Sagadahoc Date Recorded _11/17/2017 Time Recorded 10:45:00 AM

RE'	TTD	TITLE 36, M.R.S.A. SECTION	NS §§4641-4641N		recorded	#0.00	1111
G1-1-				Transfer Ta	x Amount	\$0.00	
Sagadaho	<u> </u>			Docume	nt Number	2017r-0848	32
	ATIT				Book	2017	
BATH, B					Page	8482	
2. Municipality	/ lownship			ВОО	_	ISTRY USE ONLY	
3. GRANTEE/ PURCHASER	MIDCOAST 3a) Name (LAST)	FEDERAL CREDIT UNION (FIRST)	N	(MI)	b) SSN or Feder	ral ID	
	3c) Name (LAST)	(FIRST)		(MI) :	d) SSN or Feder	ral ID	
	831 MIDDL 3e) Mailing Address]	a) 3314 of Teder	ario	
	BATH 3f) City				ME 3g) State	04530 3h) Zip Code	
4. GRANTOR/ SELLER		FEDERAL CREDIT UNION	N	(MI) ²	b) SSN or Feder		
	4c) Name (LAST)	(FIRST)		(MI) 4	d) SSN or Feder	al ID	
	831 MIDDL	E STREET			a, sait of react		
	4e) Mailing Address				, 		
	BATH				ME	04530	
5. PROPERTY	4f) City			e of property—Enter t	4g) Sta	· · · · · · · · · · · · · · · · · · ·	de
	26 5a) Map 831 MIDDL 5c) Physical Location	161 Sul	b-Lot Check any	s the property being s y that apply: tax maps exist Itiple parcels tion of parcel	0.61	tions)—» 304	
6. TRANSFER TA	X 6a) Purchase I	Price (If the transfer is a gift, enter "0")		6a \$0			.00
		t Value (enter a value only if you ente	red "0" in 6a) or		1,500		00.
	6c) Exemption	claim – Check the box if either granto	r or grantee is claiming	exemption from tr	ansfer tax and	l explain.	
11 MONTH	NNSFER (MM-DD-YYYY 09 2017 DAY YEAR	front a substantial financial penalty	y could be triggered by	development, sub	division, parti	tion or change in CLASSI	use. FIED
in the transfer w than its fair mar	rhich suggest that the p ket value? If yes, check	· A	10. INCOME TAX WI	income t Seller has qualifie A waiver has been	ax because: d as a Maine r received fron	esident n the State Tax As:	sessor
Deed to co		for real estate tax purposes		Consideration for Foreclosure Sale	, , ,		
11. OATH	our knowledge and	es as set forth by Title 36 §4641-K, we her I belief, it is true, correct, and complete. Gra DAST FEDERAL CREDIT UNION	antee(s) and Grantor(s) 2017 Grantor MI	t we have each exa or their authorized IDCOAST FED	agent(s) are r	equired to sign be ED LT t UNI (020/	elow: /2017
13 DDEDARED	Grantee			***	40.0545	Date11/20/	2017
12. PREPARER	Name of Preparer	ANGEL BROADWATER P.O. BOX 924		Number (207) 7		v ora	
	Mailing Address	BRUNSWICK, ME 04011			broadwaterlav	w.org	_
			FdX INI	umber			

Merits: 0011796328823 Trips: 7173610200047



RETTD

MAINE REVENUE SERVICES **REAL ESTATE TRANSFER TAX DECLARATION**

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

PLEASE TYPE OR PRINT CLEARLY

11/17/2017 12:15 PM 2017R-08514

Transfer Tax of 1548,80 State of Maine Transfer Tax

1. COUNTY	DO NOT U	SE RED INK!	S	tate of Maine Transfer Fax
Sagadaho			7	2017-8514
2. MUNICIPALIT	Y/TOWNSHIP			1
Bath			воок	PAGE—REGISTRY USE ONLY
3. GRANTEE/	3a) Name (LAST, FIRST, MI)			
PURCHASER	Parker, Ann T.	·		_
	3c) Name (LAST, FRST, MI)			:
	, 3e) Mailing Address			
	PO Box 293			•
	3f) City 3g) State 3h) Zip Code			
	Davenport, CA 95017			
4. GRANTOR/	4a) Name (LAST, FIRST, MI)			
SELLER	Graham, Jessie E.			
	4c) Name (LAST, FIRST, MI)			
	1 4e) Mailing Address			_
	1 Grove Street			
	4f) City 4g) State 4h) Zip Code			
•	Bath ME 04530			
5. PROPERTY	5a) Map Block Lot	Sub-Lot	Check any that apply:	5b) Type of property—Enter the code number
	21 212		□ Martan, managaritat	that best describes the property being sold. (See instructions)
			☐ No tax maps exist ☐ Multiple parcels	
	5c) Physical Location		portion of parcel	5d) Acreage:
	1 Grove Street, Bath, ME 04530			
6. TRANSFER				
TAX	6a) Purchase Price (If the transfer is a gift, enter"0")	6a	·\$351,750.00	· · · · · · · · · · · · · · · · · · ·
	6b) Fair Market Value (enter a value only if you entered "0" ii if 6a) was of nominal value)	n 6a) or 6b		
	6c) Exemption claim - \square Check the box if either grantor or g	rantee is claiming exempti	on from transfer tax and	explain.
				4
	7. DATE OF TRANSFER (MM-DD-YYYY)			ed as Farmland, Open Space or Tree
	November 16, 2017	Growth, a Substantial fin partition or change in use	, , ,	gered by development, subdivision,
	MONTH DAY YEAR	paration of change in asc		☐ CLASSIFIED
9. SPECIAL CIRC	UMSTANCES - Were there any special circumstances in the trans	er which 10. INC	OME TAX WITHHELD- Bu	yer(s) not required to withhold
	price paid was either more or less than its fair market value?			aine income tax because:
If yes, check the I	oox and explain:		Seller has qualified as a	a Maine resident ived from the State Tax Assessor
				operty is less than \$50,000
 	Aware of penalties as set forth by Title 35 §4641-K, we hereby			
11. OATH	belief, it is true correct, and complete. Grantee(s) and Grantor(s) or	their authorized ageritis) <u>are</u>	e required to sign below:	
	Grantee Mr. Tille MBN 1620	7 Grantor	J. FR	Date NOV 1 6 2017
	Grantee Date	Grantor	XI LEH	Date
12. PREPARER	Name of Preparer Bay Area Title Services	Phone Num	mber (207) 775-5900	· · · · · · · · · · · · · · · · · · ·
	Mailing Address 1711 Congress Street, Portland ME 04102	Email		·
L				

DLN: 1001740017860

Registry	Sagadahoc
Date Recorded	11/20/2017
Time Recorded	09:31:00 AM
Transfer Tax Amount	\$0.00
Document Number	2017r-08526
Book	2017
Page	8526
•	

RE	ווט	111LE 30, WI.K.S.A	1. SECTIONS \$\$4641-46		fer Tax Amount \$0.00	
Sagadaho	oc					16
1. County					cument Number <u>2017r-0852</u>	20
BATH					Book 2017	
2. Municipality	y/Township				Page 8526	
3. GRANTEE/		· · · · · · · · · · · · · · · · · · ·			BOOK/PAGE—REGISTRY USE ONLY	
PURCHASER	WING, II	RONA	ID			
	3a) Name (LAST)	(FIRST)	LD	C (MI)	3b) SSN or Federal ID	
				` ,		
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Federal ID	
	368 OLD B	ATH RD				
	3e) Mailing Address					
	BRUNSWI	CK			ME 04011	
	3f) City				3g) State 3h) Zip Code	
4. GRANTOR/ SELLER	DOYLE	CHARI	LOTTE			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Federal ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Federal ID	
	111 RIDGE	RD				
	4e) Mailing Address					
	NORTH BA	TH			ME 04530	
	4f) City				4g) State 4h) Zip Coo	de
5. PROPERTY	16	47			-Enter the code number that best being sold . (See instructions)—»	
	5a) Map	Block Lot		eck any that apply:		
	111 RIDGE	RD		No tax maps exi Multiple parcels		
	5c) Physical Location			Portion of parce	1 1.00	
6. TRANSFER TA	X 6a) Burchasa	Price (If the transfer is a gift,		. [- 00
					80	.00
	if 6a) was of n	et Value (enter a value only it ominal value)	f you entered "0" in 6a) o	r 6b	\$158,000	.00
		,	at			
36 MRS 8	00) Exemption	claim - X Check the box if ei	ther grantor or grantee is cl	aiming exemption f	rom transfer tax and explain.	
) - Deed from Parent	to Child w/o Actua	ii Consideratio	on	
	NSFER (MM-DD-YYY)		R-If the property is classified	as Farmland, Open	Space, Tree Growth, or Working Water	-
11 MONTH	17 2017 DAY YEAR	Hone a substantial final	iciai penaity codid be trigge	erea by developmer	nt, subdivision, partition or change in u	
		here any special circumstances	10. INCOME	TAX WITHHELD - Br	yer(s) not required to withhold Maine	
in the transfer w	hich suggest that the	orice paid was either more or le	ss	ind	come tax because:	
man its iair man	ket value? If yes, check	the box and explain:			ualified as a Maine resident	
					s been received from the State Tax Ass on for the property is less than \$50,000	
				Foreclosure		o .
11. OATH	Aware of penalti	es as set forth by Title 36 §464	1-K, we hereby swear or affi	rm that we have ea	ch examined this return and to the be	st of
	Grantee CHARL				orized agent(s) are required to sign be	
	Grantee CTITICE Grantee	- Date	$\frac{11/20/2017}{11/20/2017}$ Grantor		WING, II Date 11/20/2	
12. PREPARER	Name of Preparer	MARK WALTZ	<u>11/20/2017</u> Grantor	Phone Number (2017
	Mailing Address	PO BOX 177			nmw@cascobaytitle.com	
		BRUNSWICK, ME 04011	1	Fax Number		

DLN: 1001740017878

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

Registry	Sagadahoc
Date Recorded	11/20/2017
Time Recorded	02:07:00 PM
ransfer Tax Amount	\$893.20
Document Number	2017r-08590

NE	III	111LE 36, M.F	R.S.A. SECTIONS 994641-4	4641N	nsfer Tax Amount	\$893.20	
Sagadah	oc						
1. County					ocument Number		<u>) </u>
BATH					Book	2017	
2. Municipalit	y/Township				Page	8590	
3. GRANTEE/	-		-		BOOK/PAGE—REG	ISTRY USE ONLY	
PURCHASER	WOLFERT	ЦА	NNAH	D			
	3a) Name (LAST)	(FIRST)		R (MI)	3b) SSN or Feder	al ID	
	WOLFERT	WII	LLIAM	R			
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	al ID	
	356 MIDDL	E STREET					
	3e) Mailing Address						
	BATH				ME	04530	
4 CDANTOD	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	SPENCER	AN	N	L.			
	4a) Name (LAST)	(FIRST))	(MI)	4b) SSN or Feder	al ID	
	4c) Name (LAST)	(FIRST))	(MI)	4d) SSN or Federa	al ID	
		OD TERRACE					
	4e) Mailing Address					¬	
	BRUNSWIC	CK			ME ME	04011	
5. PROPERTY	4f) City				4g) Sta		
J. FROFERIT	33	35		describes the proper	 Enter the code number ty being sold. (See instruct 		
	5a) Map	Block L	Lot Sub-Lot	Check any that appl No tax maps 6			
	356 MIDDL	E STREET		Multiple parce	els 0.22		
	5c) Physical Location			Portion of par	cel 5d) Acreage		
6. TRANSFER TA	AX 6a) Purchase	Price (If the transfer is a	gift, enter "0")	6a	\$203,000		.00
			only if you entered "0" in 6a)		+202,000		
		ominal value)		6b		١.	.00
	6c) Exemption	claim – Check the box	ox if either grantor or grantee is	claiming exemption	from transfer tax and	explain	
		—		enanning examplica	THOM Garister tax and	explain.	
7 DATE OF TRA	ANSFER (MM-DD-YYY	V) 9 WARNING TO D	DIVED IS A DESCRIPTION OF THE SECOND				
11	17 2017		BUYER–If the property is classifical financial penalty could be trigonal to the could be trigona	ed as Farmland, Ope gered by developm	en Space, Tree Growth, ent, subdivision, partit	or Working Water- ion or change in use	e.
MONTH	DAY YEAR		· · ·			CLASSIFIE	
9. SPECIAL CIRC	CUMSTANCES—Were t	here any special circumsta	ances 10. INCOM		Buyer(s) not required to	o withhold Maine	
	vnich suggest that the ket value? If yes, check	price paid was either more the box and explain:	e or less		income tax because: qualified as a Maine re	sident	
					nas been received from		sor
					ntion for the property is	s less than \$50,000	
1. OATH	Aware of nenals	as as set forth by Title 36	\$4641 K wa hereby	Foreclosu			
	our knowledge and	d belief, it is true, correct, ar	§ \$4641-K, we hereby swear or a and complete. Grantee(s) and G	rantor(s) or their au	each examined this ret thorized agent(s) are re	urn and to the best equired to sign belov	ot w:
	Grantee ANN L.	SPENCER	Date 11/20/2017 Granto			Date 11/20/20	
7822	Grantee		Date <u>11/20/2017</u> Granto	or WILLIAM I	R WOLFERT	Date 11/20/20	
12. PREPARER	Name of Preparer			Phone Number_			_
	Mailing Address	70 CENTER STREET		E-Mail Address	Lynn@mclaughlintitle	e.com	_
		PORTLAND, ME 04101	1	Fax Number			

DLN: 1001740017929

Registry	Sagadahoc
Date Recorded	11/22/2017
Time Recorded	11:53:00 AM
Transfer Tax Amount	\$1,355.20
Document Number	2017r-08634
Book	2017
Page	8634
BOOK/DAGE DEC	ISTRY LISE ONLY

Sagadahoc 1. County BATH 2. Municipality/Township 3. GRANTEE/ PURCHASER THOMPSON Ja) Name (LAST) CASSIER AICHAEL 3c) Name (LAST) S81 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER Document BOOK BOOK BOOK AMAILINDA (MI) 3 4. GRANTOR/ SELLER DOCUMENT BOOK BOOK BOOK CHRST) (FIRST) (FIRST) (MI) 3 4. GRANTOR/ SELLER H.	SSN or Federal ID SSN or Federal ID NH 3g) State 3h) Zip Code St. 2017 St.
Document	Book 2017 Page 8634 K/PAGE—REGISTRY USE ONLY Bib) SSN or Federal ID Id) SSN or Federal ID NH 03781
BATH 2. Municipality/Township 3. GRANTEE/ PURCHASER THOMPSON Ja) Name (LAST) CASSIER MICHAEL B. (MI) 33 (MI) 34 (MI) 35 (MI) 36 (MI) 38 (MI) 39 (MI) 41 (MI) 31 (MI) 31 (MI) 31 (MI) 31 (MI) 32 (MI) 34 (MI) 35 (MI) 41 (M	Page 8634 K/PAGE—REGISTRY USE ONLY Sib) SSN or Federal ID sid) SSN or Federal ID NH 03781
2. Municipality/Township 3. GRANTEE/ PURCHASER THOMPSON Sa) Name (LAST) CASSIER MICHAEL Sc) Name (LAST) S81 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE 4a) Name (LAST) (FIRST) CHARLES H. (MI) 4	K/PAGE—REGISTRY USE ONLY Sb) SSN or Federal ID sd) SSN or Federal ID NH 03781
3. GRANTEE/ PURCHASER THOMPSON Sa) Name (LAST) CASSIER MICHAEL Sc) Name (LAST) S81 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE 4a) Name (LAST) (FIRST) CHARLES H. (MI) 4. GRANTOR/ SELLER PLAINFIELD A GRANTOR/ SELLER PLAINFIELD A GRANTOR/ SELLER PIERCE A Name (LAST) (FIRST) (MI) A GRANTOR/ SELLER PIERCE A Name (LAST) (FIRST) (MI) A GRANTOR/ SELLER	K/PAGE—REGISTRY USE ONLY Sb) SSN or Federal ID sd) SSN or Federal ID NH 03781
PURCHASER THOMPSON 3a) Name (LAST) CASSIER MICHAEL 3c) Name (LAST) Sel RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE 4a) Name (LAST) (FIRST) CHARLES (MICHAEL (MI) 3 (MII) 4 CHARLES (FIRST) (MII) 4	id) SSN or Federal ID NH 03781
3a) Name (LAST) (FIRST) (MI) 3 CASSIER MICHAEL 3c) Name (LAST) (FIRST) (MI) 3 581 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE CHARLES 4a) Name (LAST) (FIRST) (MI) 4	id) SSN or Federal ID NH 03781
CASSIER 3c) Name (LAST) 581 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE 4a) Name (LAST) (MI) 4. GRANTOR/ SELLER PIERCE (FIRST) (MI) 4. GRANTOR/ SELLER PIERCE (FIRST) (MI) 4. GRANTOR/ SELLER PIERCE (FIRST) (MI) ALIER	id) SSN or Federal ID NH 03781
3c) Name (LAST) (FIRST) (MI) 3 581 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE CHARLES 4a) Name (LAST) (FIRST) (MI) 41	NH 03781
581 RIVER ROAD 3e) Mailing Address PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE 4a) Name (LAST) (FIRST) (MI) 4.	NH 03781
PLAINFIELD 3f) City 4. GRANTOR/ SELLER PIERCE CHARLES H. (MI) 4	
3f) City 4. GRANTOR/ SELLER PIERCE CHARLES 4a) Name (LAST) (FIRST) (MI) 4I	
4. GRANTOR/ SELLER PIERCE CHARLES 4a) Name (LAST) (FIRST) (MI) 4I	3g) State 3h) Zip Code
SELLER PIERCE CHARLES H. 4a) Name (LAST) (FIRST) (MI) 4I	
FRANCIS AROLYNN G.	b) SSN or Federal ID
	d) SSN or Federal ID
31 WEST PASEO CANASTA	
4e) Mailing Address	
GREEN VALLEY 4f) City	AZ 85614
5. PROPERTY 5h) Type of property—Fater th	4g) State 4h) Zip Code
describes the property being so	
5a) Map Block Lot Sub-Lot Check any that apply: No tax maps exist	
65 WHISKEAG ROAD Multiple parcels Portion of parcel	1.94
3c/ Priysical Edication	5d) Acreage
6. TRANSFER TAX 6a) Purchase Price (If the transfer is a gift, enter "0") 6a \$308,	.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 exemption from tra	insfer tax and explain.
7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the property is classified as Farmland, Open Space,	Tree Growth, or Working Water-
11 21 2017 front a substantial financial penalty could be triggered by development, subd	r
MONTH DAY YEAR 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances 10. INCOME TAX WITHHELD—Buyer(s) r	CLASSIFIED
n the transfer which suggest that the price paid was either more or less income ta	not required to withhold Maine ax because:
	as a Maine resident
· · · · · · · · · · · · · · · · · · ·	received from the State Tax Assessor the property is less than \$50,000
Foreclosure Sale	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 that we have each example the state of the sta	nined 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 a Grantee CHARLES H. PIERCE Date 11/22/2017 Grantor LINDA D. THOMP	-
Grantee AROLYNN G. FRANCIS Date 11/22/2017 Grantor MICHAEL B. CAS	SIED 11/22/2017
2. PREPARER Name of Preparer JEFFREY VIGUE Phone Number (207) 51	Date
Thore realises	eferredtitleandclosing.com
SOUTH PORTLAND, ME 04106 Fax Number	

Merits: 0011796330735 Trips: 7173610200071



MAINE REVENUE SERVICES

REAL ESTATE TRANSFER TAX DECLARATION 11/27/2017 11:13 AM 2017R-08675 RETTD 36 M.R.S. §§ 4641-4641N Transfer Tax of 2832.00 1. County State of Maine Transfer Tax SAGADAHOC COUNTY MAINE SAGADAHOC 2017-8675 2. Municipality/Township BATH **BOOK/PAGE—REGISTRY USE ONLY** 3. GRANTEE/ **PURCHASER** 33) Name LAST of BUSINESS, FIRST, MI NATIONSTAR MORTGAGE LLC DBA MR. 3c) Name, LAST or BUSINESS, FIRST, MI 3el Mailing Address after purchase of this property 8950 CYPRESS WATERS BLVD 75019 COPPELL ΤX 4a) Name, LAST or BUSINESS, FIRST, MI 4. GRANTOR/ SELLER WELLS FARGO BANK, N.A. 4c) Name, LAST or BUSINESS, FIRST, MI C/O NATIONSTAR MORTGAGE LLC, 8950 CYPRESS 4f) City 4h) ZIP Code 4g) State 75019 TXCOPPELL 5a) Map Block Lot Sub-Lot 5b) Type of property—Enter the code number that best 5. PROPERTY describes the property being sold. (See instructions)---> 63 7 Check any that apply: No tax maps exist 5d) Acreage Sc) Physical Location Multiple parcels VARNEY MILL ROAD Portion of parcel 6. TRANSFER TAX 655000 **.00** 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 .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. 8, WARNING TO BUYER-If the property is classified as Farmland, Open Space, Tree Growth, or Working Water-7. DATE OF TRANSFER (MM-DD-YYYY) front a substantial financial penalty could be triggered by development, subdivision, partition or change in use. 10-19-2017 CLASSIFIED MONTH DAY YEAR 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances 10. INCOMETAX 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 waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 Foreclosure sale Aware of penalties as set forth by 36 M.R.S. § 4641-K, we hereby swear or affirm that we have each examined this return and to the best of 11. OATH 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: Date 11-9-2017 11-9-2017 du Theole as asent Tinde of agout Grantor Grantee Grantor

Rev. 12/15

Name of Preparer

Mailing Address

12. PREPARER

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

Phone Number

Email Address

Merits: 0011796330316 Trips: 7173610200033

1	2RETTD	1	NE REVENU ESTATE TRA DECLARA	ansfer ta			2017 Transfer	2017 3:56 PM 7R-08685 Tax of 1975.60 Jaine Transfer Ta	
	rtd	TITLE 36, N	A.R.S.A. SECTIO	NS §§4641-4	641N			OC COUNTY MAI	
1. County	.	•							
SAGADA	HOC						7 ~ 1 ~	0195	-
2. Municipality	/Township					•	2011-	-8682	
BATH									
3. GRANTEE/						BOOK/P	AGE—REGISTE	RYUSEONLY	
PURCHASER	3a) Name LAST of BUSINE HUGHES, E	SS, FIRST MI LLEN K.				3b			
	HUGHES, J	SS.FIRST.ML AMES O.				3d			
	3e) Mailing Address 725 CRANE	BLVD.	, .						
	LIBERTYVI	LLE			•		TL.	60048	
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINE THE ESTAT	SS, FIRST, MI E OF ADA	s. REC	KNĀGĒL		_4b		··	
	4cl Name. LAST, or, BUSINE	SS. FIRST. MI				, 4d			
	4e) Mailing Address 943 MIDDI	e streët		-		-			
	ancoy BATH						49) St <u>a</u> te .ME	4h)Zip Code 04530	
S. PROPERTY	5a) Map 13	Block	Lot 048	Sub-Lot : : 1	5b) Type of proper describes the prope Check any that app No tax maps	rty being sold. ly:			
	5c) Physical Location 1515 WASHI	INGTON ST	REET	· · ·	Multiple pare	•			
6.TRANSFERT	AX 6a) Purchase Pr	ice (If the transfer	is a gift, enter "0	")	6a		4.	49000.0	00
	6b) Fair Market if 6a) was of no	Value (enter a valu minal value)	ie only if you en	tered "0" in 6a)	or 6b		. •	٥.	00
l.	6c) Exemption cl	aim – , Check the	e box if either gran	ntor or grantee is	s claiming exemptio	on from trans	fer tax and ex	plaîn.	
11-27 MONTH	ANSFER (MM-DD-YYYY) 7—2017 DAY YEAR	front a substa	ntial financial pen	alty could be trig	ied as Farmland, Op ggered by develops	nent, subdiv	ision, partition	or change in use. CLASSIFIED	<u>·</u>
in the transfer v	CUMSTANCES—Were the which suggest that the pr ket value? If yes, check the	ice paid was either n		10. INCOM		income tax is qualified a	because: s a Maine resid	dent	
•				!		ration for the		ne State Tax Assesso	ır
11.OATH	our knowledge and l	s as set forth by Title belief, it is true, corre	ct, and complete.	Grantee(s) and (affirm that we have Srantor(s) or their a or X X Y	each exami uthorized sy	ent(s) are requ	ired to sign below.	F
	Grantee 22 U	1-/k	Date [1] Z Date	Grant	- / / / F	0. R		Date	_
12. PREPARER		ohn W. Voorhees			Phone Number	(207) 443-13			<u>=</u>
		39 Washington Stree	et		_ E-Mail Address	iohn@waar	heeslaw.com		
		3ath, ME 04530		· ••	Fax Number	(207) 443-	2273		
		http://www.main	e.gov/revenue/p	ropertytax/tran	sfertax/transfertax	.htm			

Merits: 0011796331202 Trips: 7173610210005



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX **DECLARATION**

36 M.R.S. §§ 4641-4641N

11/28/2017 11:46 AM

2017R-08698

1. COUNTY						Transfer Tax of 946,00 tate of Maine Transfer 1	
Sagadah					SA	AGADAHOC COUNTY MA	INE
2. MUNICIPALIT Bath	Y/TOWNSHIP					E-REGISTRY USE O	•
3. GRANTEE/ PURCHASER	3a) Name LAST or BU Huntwood,		-			<u>. </u>	
	3c) Name LAST or B Huntwood,	USINESS, FIRST, MI					
	3e) Mailing Address 13 Star Flow 3f) City 3g) Stat Brunswick, I	e 3h) Zip Code					
4. GRANTOR/ SELLER	4a) Name LAST or B LaTour, Kir						
	4c) Name LAST or 8	USINESS, FIRST, MI					
	4e) Mailing Address 15 Somerse 4n City 4g) Stat Bath ME 04	e 4h) Zıp Code					
5. PROPERTY	5a) Map 20	Block	Lot 366	Sub-Lot	5b) Type of property—En the property being sold.	tler the code number that t (See instructions) —»	est describ
	5c) Physical Location 15 Somerset I	Place, Bath, M	1E 04530		Check any that apply No tax maps exist Multiple parcels portion of parcel	5d) Acreage	·
6. TRANSFER	TAX			· · · · · · · · · · · · · · · · · · ·			
	6a) Purchase Price			•	6a	\$215,000.00	V
	6b) Fair Market Val if 6a) was of nomin	iai value)			6b		
			box if either gr	antor or grantee	e is claiming exemption	n from transfer tax a	nd explai
Noven	RANSFER (MM-DD-Y) nber 22, 2017 DAY YEAR	or W	ARNING TO BUY orking Waterfront ivision, partition or	a suostanuai iinan	ly is classified as Farmland clal penalty could be trigge	d, Open Space, Tree Greed by development,	owth,
9. SPECIAL CI	RCUMSTANCES - W	ere there any specia	l circumstances in	- 40 late	Mar Tay Burn to Fr	☐ CLASSIFIED	
ine transter whi fair market value	ch suggest that the pric	e paid was either m	ore or less than its	ີ Ma `⊠ໄS∈	OME TAX WITHHELD- Fame income tax because: eller has qualified as a Mai	ne resident	
	s dox and explain.			_ c.	waiver has been received to onsideration for the propertoreclosure Sale	from the State Tax Asse	ssor
11. OATH	Aware of penaltic best of our knowledg sign below: Grantee	es as set forth by T ge and belief, it is tru	Contect, and con	ve hereby swear o nplete. Grantee(s) 2-2-17 Grantor	r affirm that we have each and Grantor(s) or their au	examined this return an althorized agent(s) are re	quired to
	Granlee M.	Hunthroad		2201 Grantor		Date	二· 7 二
12 PREPARER	Name of Preparer Pl	henix Tille Services,	LLC - Brunswick	Phone N	umber (207) 725-8055		
	Mailing Address 16	59 Park Row, Bruns	wick ME 04011	Email_	1		
		http://www.maine	.cov/revenueln=		tax/transfertax.htm		
				neithiavilially, (f)	LAWIENDSHIELDA DEM		

PROCESSED

DLN: 1001740018019

O	NLINE.		MAINE REVENUE	SERVICES			Registry	Sag	<u>adaho</u>	<u> </u>
	RE-PROCE	22'	REAL ESTATE TRA			Da	te Recorded	11/2	29/201	7
	TTD		DECLARAT			Tin	ne Recorded	10:2	27:00 A	AM
		'	TLE 36, M.R.S.A. SECTION	NS \$\$4641-4641N	Tra	ansfer 7	ax Amount	\$81	4.00	
Sagadah	oc				,	Docum	ent Number	201	7r-087	<u> </u>
1. County					4		Book			07
BATH	7						Page			
2. Municipality 3. GRANTEE/	y/ iownsnip				_	ВО	_rage OK/PAGE—REG			
PURCHASER	IIIAGII	C					1100	31111 0	JE OIVE	
	LILAC, LI 3a) Name (LAST)		(FIRST)		(M)	D	3b) SSN or Feder	allix		
					, ,,,,,	"'	Jaj Jan of Feder	anib		
	3c) Name (LAST)		(FIRST)		(MI)	3d) SSN or Feder	al ID		
	11 MULBE	ERRY LA	NE							
	CUMBERI	AND					7 [7 [
	3f) City	ZAND					ME 3g) State		4021) Zip Code	
4. GRANTOR/ SELLER	THE ESTA	ATE OF	MAYNARD W. OV	EDI OCK			3g) state	311) Zip Code	
JEELEN	4a) Name (LAST)	112 01	(FIRST)	ENLOCK	(MI)	4b) SSN or Federa	al ID		
	4c) Name (LAST)		(FIRST)		(MI))	4d) SSN or Federa	al ID		
	4e) Mailing Address	HINGTO	N STREET							
	BATH						7	- I		
	4f) City		<u> </u>				ME ME		4530	
5. PROPERTY	12			5b) Ty	pe of propert	y—Enter	4g) Star the code number	that hest	4h) Zip Co	de
	5a) Map	Block	Lot Sub	describ	es the prope ny that app	rty being :	sold. (See instructi	ions)—»	201	
	1531 WAS	HINGTO	N STREET	No	o tax maps Iultiple parc		0.00		7	
	5c) Physical Location	1111010	N STREET		ortion of par		0.00 5d) Acreage			
6. TRANSFER TA	X 6a) Purchase	Price (If the	transfer is a gift, enter "0")		60	¢104				1 00
			er a value only if you entere	ed "0" in 62) or	6a	\$185	,000			.00
	if 6a) was of	nominal valu	e)	a o moayor	6b					.00
	6c) Exemption	claim – 🔲	Check the box if either grantor	or grantee is claimin	g exemptio	n from ti	ansfer tax and	explain.		1
								•		
	NSFER (MM-DD-YYY		ARNING TO BUYER-If the prope	erty is classified as Fa	rmland, Op	en Space	, Tree Growth, o	or Work	ing Water	ſ-
MONTH	28 2017 DAY YEAR	front	a substantial financial penalty	could be triggered by	y developm	nent, sub	division, partiti	on or ch	າange in ເ	use.
9. SPECIAL CIRC	UMSTANCES—Were	there any spec	cial circumstances	10. INCOME TAX W	ITHHELD-	Ruver(s)	not required to	ithbo	CLASSIF	
in the transfer w	hich suggest that the et value? If yes, check	price paid wa	s either more or less			income :	ax because:		nu maine	
	, ,						d as a Maine res received from		te Tax Ass	essor
					Consider	ation for	the property is	less tha	in \$50,000	0
11. OATH	Aware of penalt	ies as set fort	h by Title 36 §4641-K, we here	by swear or affirm th	Foreclosu		main and their mate			
	our knowledge an	u belief, it is tr	ue, correct, and complete. Gran	ntee(s) and Grantor(s)	or their au	thorized	agent(s) are rec	ırn and quired t	to the be o sign be	st of low:
	Grantee IHE E	COLATE O	F MAYNARD W/09/28	RIZOGK _{intor} LI	LAC, LL	·C		Date_	11/29/2	2017
12. PREPARER	Grantee Name of Preparer	KRISTIN (Glantol	o News-la-	(207) 7	74 4400 5-4	Date _	11/29/2	2017
	Mailing Address		TIC PLACE				74-4400 Ext t@atlancoast.co	m		
	-	SOUTH PO	ORTLAND, ME 04106		lumber					



12RETTD **RETTD**

Merits: 0011796331004 Trips: 7173610210009 MAINE REVENUE SERVICES **REAL ESTATE TRANSFER TAX**

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

11/29/2017 11:28 AM

1. County							7R-08721		
Sagadahoc						State of	er Tax of 853,60 Maine Transfer 1	Fax	
2. Municipality/T	ownship						LOC COUNTY MA		
Bath						201	7-872	ļ	
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, F	idet M				K/PAGE-	REGISTRY USI	E ONLY	
	Willey, Jason, C.	irot, ivi			182 (d				7
	3c) Name LAST or BUSINESS, F	IRST MI			12S (bl				_
	Willey, Melissa, A.	ii vort, mu		7 6	d) Con				٦
	3e) Mailing Address		·						٦
	45 Pit Road					1			
	3f) City					3g) State	3h) Zip Code		
	Phippsburg					-9,	,		
	1 tuppobolg								
4. GRANTOR/	4a) Name LAST or BUSINESS, F	îrst, mi			b) SSN				7
SELLER	Small, Mark, M.								
	4c) Name LAST or BUSINESS, F	IRST, MI		<u> </u>	d) SSN				-1
	3 3								
	4e) Mailing Address	· · · · · · · · · · · · · · · · · · ·							
	1288 High Street								
	4f) City		·	 1	~	4g) State	4h) Zip Code		_
	Bath				L	ME	04530		
5. PROPERTY	5a) Map Bloo	k Lot Sub)-Lot	5b) Type of prop	perty-Ente	f the code nu	mber that best e instructions) —=		
	20	80		Check any tha					
	5c) Physical Location			☐ No tax ma		5d) Acr	eage		
	1288 High Street, Bath,	ME 04530		☐ Multiple pa☐ Portion of					
6. TRANSFER TA	X 6a) Purchase Price (If the	transfer is a gift, enter "0")			6a		•	\$194,0	00.00
	6b) Fair Market Value (en 6a) or if 6a) was of nomin	ter a value only if you entered "0" in al value)			6ь			:	\$0.00
	6c) Exemption claim -	Check the box if either grantor or gran	ntee is claiming exe	emption from tr	ansfer ta	x and expla	in.		
. DATE OF TRAI	SFER (MM-DD-YYYY)	WARNING TO BUYER - If the front a Substantial financial penalty							
11	22 2017	Horit a Substantial financial periorly	COMU DE MIGNECA	ny developme	111, 300011	aratori, peru		ASSIFIED	כ
MONTH	DAY YEAR ASTANCES-Were there any specia	a) ciratimalanaca				D			
	suggest that the price paid was eith		10. INCOME	TAX WITHH	IELD		s) not required to war tax because:	mnoio Maine	е
han its fair market va	lue? If yes, check the box and expla	in:		Seller has	-		e resident om the State Tax	Accecer	
	· · · · · · · · · · · · · · · · · · ·				ation for t		is less than \$50,0		
11. OATH	Aware of penalties as set forth	by Title 36 §4641-K, we hereby swea plete. Grantee(s) and Grantor(s) or the	r or affirm that we h	nave each exar	mined thi	s return and	to the best of our	knowledge a	ind
	Grantee JUST C Will	Date 11/23/17	Grantor	nt mis	00 Pc	Date	11/22/17		
		Muy Date 11/2/17	_ Grantor			Date			<u></u>
12. PREPARER	·	e & Closing Services, LLC	Phone N	umber <u>(20</u>	7)7 <u>75</u> -	0900	_		
		le Oaks Drive, Suite 350	E-mail Ad	·		2004			
		ortland, ME 04106	Fax Num		7)775-(<u> 1991</u>			
	. respon	" handara Barria ranga braharikan							

than its fair market value? If yes, check the box and explain:

Mailing Address

YEAR 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances

in the transfer which suggest that the price paid was either more or less

4f) City

5a) Map

7. DATE OF TRANSFER (MM-DD-YYYY)

29

DAY

Grantee Grantee.

RETTD

Sagadahoc 1. County **BATH**

3. GRANTEE/ **PURCHASER**

4. GRANTOR/

5. PROPERTY

6. TRANSFER TAX

11

11. OATH

12. PREPARER

MONTH

SELLER

2. Municipality/Township

DLN: 1001740018026

KRISTIN CONANT 76 ATLANTIC PLACE

SOUTH PORTLAND, ME 04106

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

CESSED	DLN: 1001/40018026			
LINE.	MAINE REVENUE SERVICE		Registry	Sagadahoc
RE-PROCESS.	REAL ESTATE TRANSFER	TAX	Date Recorded	11/29/2017
TD	DECLARATION TITLE 36, M.R.S.A. SECTIONS §§4641	1 464111	Time Recorded	01:46:00 PM
	111 EE 30, W.I.I.S.A. SEC 110113 99404		ransfer Tax Amount	\$616.00
			Document Number	2017r-08726
				2017
Township				8726
			BOOK/PAGE—REG	
TAYLOR 3a) Name (LAST)	AARIN (FIRST)		MI) 3b) SSN or Feder	ral ID
3c) Name (LAST)	(FIRST)		40	
2 BRECKINRIDG			MI) 3d) SSN or Feder	al ID
3e) Mailing Address				
BATH 3f) City			ME	04530
			3g) State	3h) Zip Code
HABITAT FOR I	HUMANITY / 7 RIVERS MA		4b) SSN or Feder	al ID
4c) Name (LAST)	(FIRST)	(A	4d) SSN or Feder	2110
126 MAIN STRE	ET	, ,		טו וג
4e) Mailing Address				_
TOPSHAM 4f) City			ME 4g) Sta	04086 4h) Zip Code
39 Block	38 Sub-Lot	describes the prop Check any that ap		that best cions)—» 202
167 MIDDLE STI	REET	No tax map Multiple pa		
oc) Physical Location		Portion of p	arcel 5d) Acreage	
6a) Purchase Price (If the	ne transfer is a gift, enter "0")	6a	\$140,000	.00
6b) Fair Market Value (enter a value only if you entered "0" in 6a) or		
if 6a) was of nominal v		6b		
6c) Exemption claim –	Check the box if either grantor or grantee is	s claiming exempti	on from transfer tax and	explain.
9 2017 AY YEAR	WARNING TO BUYER-If the property is classif ont a substantial financial penalty could be trig	ggered by develop	ment, subdivision, partiti	on or change in use. CLASSIFIED
MSTANCES—Were there any s in suggest that the price paid	was either more or less	IE TAX WITHHELD	 Buyer(s) not required to income tax because: 	withhold Maine
value? If yes, check the box ar	nd explain:		as qualified as a Maine re	
		Conside	r has been received from ration for the property is sure Sale	less than \$50,000
Aware of penalties as set fo	orth by Title 36 §4641-K, we hereby swear or	affirm that we have	oneb oversional district	ırn and to the best of
and benefit to	strue, correct, and complete. Grantee(s) and GR HUMANITE ate 7 RIVYERS MAINE	rantor(s) or their a	uthorized agent(s) are red	quired to sign below:
rantee	Date 11/29/2017 Grant		ILOK	Date 11/29/2017 Date 11/29/2017
Name of Preparer <u>KRISTI</u>	N CONANT	· · · · · · · · · · · · · · · · · · ·	(207) 774-4400 Ext	Date

E-Mail Address __kconant@atlancoast.com

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

Merits: 0011796331508 Trips: 7173610210017



1CRETTD

1. County

MAINE REVENUE SERVICES **REAL ESTATE TRANSFER TAX DECLARATION**

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

11/30/2017 10:32 AM 2017R-08747

Transfer Tax of 567.60

Sagadahoc						ate of Maine Tran SADAHOC COUNT	
2. Municipality/	ownship						~
Bath				}	2	2017-8-	14 /
3. GRANTEE/ PURCHASER			**************************************		BOOK/PAGE	REGISTRY USE	E ONLY
	3a) Name LAST or BUSINESS, F	TRST, MI		31	b) SSN or F		·
	Whitcomb, Dustin, C.						
	3c) Name LAST or BUSINESS, F	IRST, MI		30) SSN or F		
	Fraser, Katherine, L.						
	3e) Mailing Address						
	133 Langdon Rd.					1	
	3f) City				3g) State	J 3h) Zip Code	
	Richmond				M		
4. GRANTOR/	4a) Name LAST or BUSINESS, F	IRST, MI		41:) SSN or F		
SELLER	Delano-Earl, Elizabeth,	A.					
,	4c) Name LAST or BUSINESS, F	irst, mi		(4d	SSN or F		
	7.1				·		
	4e) Mailing Address		· · · · · · · · · · · · · · · · · · ·				
	32 Meetinghouse Road						
	4f) City			·	4g) State	l 4h) Zip Code	
	Bath				ME	04530	
5. PROPERTY	Sa) Map Bloo	k Lot	Sub-Lot	6h) Timo of propi	erty-Enter the code n	! !	
					perty being sold. (S		
	20	44		Check any that	l annhe		
	5c) Physical Location			☐ No tax map		reage	
	24 Meadow Way, Bath,	ME 04530		☐ Multiple par ☐ Portion of p			
6. TRANSFER TA	6a) Purchase Price (If the	transfer is a gift, enter "0")		6	а		\$129,000.00
	6b) Fair Market Value (en 6a) er if 6a) was of nomin	ter a value only if you entered "0" i al value)	n	61	» [****	\$0.00
	6c) Exemption claim - 🗆	Check the box if either granter or g	rantee is claiming exe	mption from tra	nsfer tax and expl	ein.	
DATE OF TRAN	ISFER (MM-DD-YYYY)	8. WARNING TO BUYER -					-
11	28 2017	front a Substantial financial pens	illy could be triggered i	by development	t, subdivision, part		e. ASSIFIED
МОИТН	DAY YEAR			·			
	ISTANCESWere there any special suggest that the price paid was either		10. INCOME	TAX WITHHE		(s) not required to wit e fax because:	hhold Maine
han its fair market va	lue? If yes, check the box and expla	ın;		_	qualified as a Mair	ie resident	
						rom the State Tax As y is less than \$50,000	
		······································		☐ Foreclosure		y is less than 400,000	,
11. OATH	Aware of penalties as set forth in belief, it is true from the set of the set	by Title 36 §4641-K, we hereby sw	ear or affirm that we have	ave each exami	ined this return an	d to the best of our k	nowledge and
	Grantee Grantee	Date ///28///	Grantor		Date	11/28/M	
	Grantee Math of no	Date 11/78/	7 Grantor		Date _		
2. PREPARER	Name of Preparer _H&D Title	e & Closing Services, LL	C Phone Nu	mber <u>(207)</u>	376-0631		
	Mailing Address: _181 Cent	er Street, Suite 2	E-mail Ad	dress			
		VIE 04210	Fax Numb		787-7800		

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

Merits: 0011796331710 Trips: 7173610210021



RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

11/30/2017 3:37 PM

2017R-08749 Transfer Tax of State of Maine Transfer Tax SAGADAHOC COUNTY MATNE

1.COUNTY SAGADAI	HOC HOC		2017-	-8749
2.MUNICIPALII BATH	Y/TOWNSHIP	800	K/PAGEREGIST	RY USE ONLY
3. GRANTEE/ PURCHASER	Baj Name (LAST, FIRST, MI) ROYALL, THOMAS B. BC) Name (LAST, FIRST, MI)			
	36) Mailing Address PO BOX 296, 10 STATE ROAD, SUITE 9 31) Gty BATH		3g) State ME	3h) Zip Code 04530
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) CITY OF BATH 4c) Name (LAST, FIRST, MI) 4e) Mailing Address 55 FRONT STREET			•
	BATH , , , , , , , , , , , , , , , , , , ,	-\tt	4g) State ME	4h) Zrp.Code 04530
5. PROPERTY	12.14	at apply: maps exist le parcels		erty—Enter the code describes the property structions]
6. TRANSFER		ofparcel	<u> </u>	
TAX		<u>S.</u>		0.00
	6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6b	<u> </u>		9000.00
	6c) Exemption claim - Check the box if either grantor or grantee is claiming exemption. Deed back to property owner due to delingent sewer liens.	n from trans	fer tax and expla	in.
	7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the pro Tree Growth, a Substantial finance subdivision, partition or change i	ial penalty co n use.	ould be triggered CLASSIFIED	by development,
	Awai	r has qualifie iver has beer	Maine income d as a Maine resi	dent se State Tax Assessor
11. OATH	Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear or affirm that we hour knowledge and belief, it is true, correct, and complete. Grantee(s) and Grantor(s) or the Grantee 122 122 123017 Grantor 12	ave each exa	amined this return age fats are requ	n and to the best of
12, PREPARER	Name of Preparer Mailing Address Bath, ME 04530 Phone Num E-Mail Address	300	-443-1333 n@voorhee:	slaw.com

Merits: 0011796331609 Trips: 7173610210019



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MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

PLEASE TYPE OR PRINT CLEARLY

11/30/2017 3:37 PM 2017R-08753

Transfer Tax of 787.60 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE

john@voorheeslaw.com

1.COUNTY DO NOT USE RED INK! 2017-8753 SAGADAHOC 2. MUNICIPALITY/TOWNSHIP BATH DOOK, PAGE-REGISTRY USE ONLY 3a) Name . LAST, FIRST, A.1 3. GRANTEE/ **PURCHASER** WIRTH, MICHAEL P 3c) Name (LAST, FIRST, MP RHODES-ARMSTRONG 3e) Mailing Address ARMSTRONG WAY 3q: State 3h) Zip Code MEST BATH .04530 ME 4a) Name (LAST, FIRST, MI) 4. GRANTOR/ THOMAS ROYALL, SELLER 4c) Name (LAST, FIRST, M') 4e) Mailing Address PO BOX STATE ROAD, 4q State 4h, Zip Code 4ft City 04530 BATH ME 5h) Type of property—Enter the code Check any that apply: 5. PROPERTY Sub-Lct number that best describes the property 052 33 being sold, iSee instructions) No tax maps ex st Sci Physical Location 5d Acreage Multiple parcels 367 MIDDLE STREET Portion of parcel 6.TRANSFER 179000 00 ба) Purchase Price (If the transfer is a gift, enter "0") 6a 📏 TAX 6b) Fair Market Value (enter a value only if you entered "0" in 6a) or .00 if 6a) was of nominal value) 6b 📏 6c) Exemption claim - Check the box if either granter or grantee is claiming exemption from transfer tax and explain. 7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the property is classified as Faimland, Open Space or Tree Growth, a Substantial financial penalty could be triggered by development. subdivision, partition or change in use. CLASSIFIED 10. INCOMETAX WITHHELD- Buyer(s) not required to withhold 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances in the transfer Maine income tax because: which suggest that the price paid was either more or less than its fair market value? If yes, check the box and explain: 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 11. OATH Aware of penalties as set forth by Title 36 \$4641-K, we hereby swear or affirm that we have each grammer this return and to the best of our knowledge and belief, it is true, correct, and complete, Granteels) and Grantprist or the cauthor specifics are required to sign below: Grantor 30/17 Grantor Date Grantee 207-443-1333 John W. Voorhees, 12. PREPARER Name of Preparer Phone Number

E-Mail Address

839 Washington Street

Bath, ME 04530

Mailing Address

1. County

BATH

3. GRANTEE/

PURCHASER

4. GRANTOR/

5. PROPERTY

6. TRANSFER TAX

11

11. OATH

12. PREPARER

MONTH

SELLER

DLN: 1001740018047

MAINE REVENUE SERVICES Registry Sagadahoc **REAL ESTATE TRANSFER TAX** Date Recorded 11/30/2017 **DECLARATION** Time Recorded 11:58:00 AM RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641N Transfer Tax Amount \$880.00 Sagadahoc Document Number 2017r-08766 Book 2017 Page 8766 2. Municipality/Township BOOK/PAGE—REGISTRY USE ONLY GOODWIN **DEBORAH** L 3a) Name (LAST) (FIRST) (MI) 3b) SSN or Federal ID MCCONNAUGHEY REBECCA Η 3c) Name (LAST) (FIRST) (MI) 3d) SSN or Federal ID 30 MEADOW WAY Be) Mailing Address **BATH ME** 04530 3f) City 3g) State 3h) Zip Code TOWNSEND KAREN G 4a) Name (LAST) (FIRST) (Mi) 4b) SSN or Federal ID **TOWNSEND** ROBERT \mathbf{C} 4c) Name (LAST) (FIRST) (IM) 4d) SSN or Federal ID 362 MIDDLE STREET 4e) Mailing Address **BATH** 04530 ME 4f) City 4g) State 4h) Zip Code 5b) Type of property—Enter the code number that best 33 53 describes the property being sold. (See instructions) 202 Check any that apply: 5a) Map Sub-Lot No tax maps exist 362 MIDDLE STREET Multiple parcels 0.10Portion of parcel 5c) Physical Location 5d) Acreage 6a) Purchase Price (If the transfer is a gift, enter "0") \$200,000 .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 - Check the box if either grantor or grantee is claiming exemption from transfer tax and explain. 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. 30 2017 DAY **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: \overline{X} 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 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: KAREN G TOWNSEND Grantee 11/30/2017 DEBORAH L GOODWIN Grantor Date__11/30/2017 ROBERT C TOWNSEND 11/30/2017 REBECCA H MCCONNAUGHEY 11/30/2017 Grantee Grantor Name of Preparer **DEANNA WOLFE** Phone Number (207) 386-0400 746 HIGH STREET Mailing Address E-Mail Address __dwolfe@hablaw.com BATH, ME 04530 Fax Number

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

PROCESSED DLN: 1001740018052

MAINE REVENUE SERVICES

ONLINE. DO NOT RE-PROCESS. RETTD			MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX			Registry Sagadahoc Date Recorded 11/30/2017			ЭС
									 17
			DECLARATION			Time Recorded 01:24:00 F			
			TITLE 36, M.R.S.A. SECTION	ONS §§4641-464	41N Tra			\$1,020.80	
Sagadah	ioc				1			2017r-08	
1. County						Joourner.	·		708
BATH							Book .		
2. Municipali	ty/Township							8768	
3. GRANTEE/ PURCHASER						BOOK	/PAGE—REGI	STRY USE ONL	Y
	REGIONA 3a) Name (LAST)	L SCHO	OOL UNIT NO. 1						
	Ja) Name (LAST)		(FIRST)		(Mi) 31	b) SSN or Federa	al ID	
	3c) Name (LAST)		(FIRST)		(MI)	Ĺ	N 2011		
	34 WING I	FARM F	PARKWAY	".	(IVII)	30	d) SSN or Federa	ıl ID	
	3e) Mailing Address								
	BATH						ME	04530	
4. GRANTOR/	3f) City						3g) State	3h) Zip Coo	
SELLER	DAHLKE		THOMAS		R				
	4a) Name (LAST)		(FIRST)		(MI)	4b) SSN or Federa	ID	
	Ac) Name (LACT)		·						
	4c) Name (LAST)	A NIT II	(FIRST)		(MI)	4d) SSN or Federa	ID	
	482 PLEASANT HILL ROAD 4e) Mailing Address								
	BRUNSWI	CK						1	
	4f) City	<u> </u>					ME	04011	
5. PROPERTY	24			5b	Type of property	y—Enter the	4g) Stat code number t	hat hest F	ode
	5a) Map	Block	003	de	scribes the proper k any that appl	ty being sol	d. (See instruction	ons)—» [20]	<u> </u>
	2 ANCHOR	POAD			No tax maps				
	5c) Physical Location	ROAD		<u> </u>	Multiple parce Portion of pare	_{cel} L	1.50		
6. TRANSFER TA	AX 6a) Purchase	Price (If th	e transfer is a gift, enter "0")		_		d) Acreage		7 00
			nter a value only if you ente	arod "0" in 62) or	6a	\$464,0			000.
	if 6a) was of r	nominal va	lue)	ned o in oa, or	6b				ີ .00
	6c) Exemption	claim – 🛚 🗓	Check the box if either grant	or or grantee is clair	• ning exemptior	from tran	sfer tax and e	volain	
Grantee is	s exempt pursua	ant to 36	MRS Section 4641-0	C(1) (transfer	to a gover	nmenta	l entity)	Apiani.	
	NSFER (MM-DD-YYY		WARNING TO BUYER-If the pro					-18/ 18/ ·	
11	30 2017	fro	nt a substantial financial penal	y could be triggere	d by developm	ent, subdiv	ree Growth, o vision, partitic	r working wat in or change ir	er- 1 use.
MONTH CIPC	DAY YEAR							CLASS	
n the transfer w	UMSTANCES—Were thich suggest that the	price paid v	vas either more or less	10. INCOME TA	ا -X WITHHELD i	Buyer(s) no ncome tax	t required to	withhold Main	ie
than its fair mark	ket value? If yes, check	the box an	d explain:		X Seller has	qualified a	is a Maine resi		
					A waiver h	as been re	ceived from t	he State Tax As	sessor
					Foreclosu	re Sale		ess than \$50,0	
11. OATH	Aware of penalt our knowledge and	ies as set fo	rth by Title 36 §4641-K, we her	eby swear or affirm	that we have e	ach exami	ned this retur	n and to the b	est of
	Grantee THOM	AS R DA	true, correct, and complete. Gr HLKE Date11/30/	antee(s) and Granto 2017 Grantor	r(s) or their aut REGIONAI	horized ag	rent(s) are req	uired to sign b	elow:
	Grantee		Date 11/30/		LUCIONAL	2 001100		Date 11/30,	
2. PREPARER	Name of Preparer	DARCY			none Number_	(207) 253		Date	
	Mailing Address		GINAL WAY, SUITE 600		Mail Address _				
		PORTLA	ND, ME 04101	Fa	x Number				

DLN: 1001740018053

Registry	Sagadahoc		
Date Recorded	11/30/2017		
Time Recorded	01:27:00 PM		
Transfer Tax Amount	\$1,636.80		
Document Number	2017R-08769		
Book	2017		
Page	8769		

KE	<u> </u>	TITLE 36, M.R.S.A. SECTIO	NS §§4641-4641N	1 11110 100	01.27.001101
Sagadah	100			Transfer Tax A	mount \$1,636.80
1. County	100		Document N	Tumber <u>2017R-08769</u>	
BATH					Book 2017
2. Municipali	ty/Township				Page 8769
3. GRANTEE/				BOOK/PA	GE—REGISTRY USE ONLY
PURCHASER			L		THE RESERVE OF THE PARTY OF THE
	MICHAEL 3a) Name (LAST)	A KNOX (FIRST)		S	
	SHAWN	KNOX			N or Federal ID
	3c) Name (LAST)	(FIRST)		C (MI) 3d) 55	N or Federal ID
		LIE DRIVE]	N OI Tederal ID	
	3e) Mailing Address		」 ────		
	DURANDO)		CO 81301	
4. GRANTOR/	3f) City				3g) State 3h) Zip Code
SELLER	KEENAN	SHAWN			
	4a) Name (LAST)	(FIRST)		(MI) 4b) SS	N or Federal ID
	4c) Name (LAST)	(Fig. 4-1)			
		TION ESTATES LANE	(MI) 4d) SSI	N or Federal ID	
	4e) Mailing Address	TION ESTATES LANE			
	FARMING'	TON			\
	4f) City	1011			ME 04938
5. PROPERTY	5		5b) Type	of property—Enter the cod	4g) State 4h) Zip Code
	5a) Map	Block Lot Sul	describes	the property being sold . (So that apply:	ee instructions)—» 201
		200 300	No t	tax maps exist	
	5c) Physical Location	HOPS POINT ROAD		tiple parcels 1	.90
6. TRANSFER TA	ΔΥ			5d) A	creage
		Price (If the transfer is a gift, enter "0")		6a \$372,000	00.
	6b) Fair Mark if 6a) was of r	et Value (enter a value only if you ente nominal value)	red "0" in 6a) or		
				6b [.00
	6c) Exemption	claim – Check the box if either granto	r or grantee is claiming e	exemption from transfer	tax and explain.
7 0 1 7 5 0 7 5 0					
11	ANSFER (MM-DD-YYY	Y) 8. WARNING TO BUYER-If the prop front a substantial financial penalty	perty is classified as Farm	nland, Open Space, Tree	Growth, or Working Water-
MONTH	30 2017 DAY YEAR		r could be triggered by t	development, subdivisio	on, partition or change in use. CLASSIFIED
9. SPECIAL CIRC	CUMSTANCES—Were t	there any special circumstances	10. INCOME TAX WIT	HHELD- Buyer(s) not re	quired to withhold Maine
n the transfer w :han its fair marl	vnich suggest that the ket value? If yes, check	price paid was either more or less		income tax be	cause:
		· L_		Seller has qualified as a A waiver has been recei	Maine resident ved from the State Tax Assessor
			<u></u>	Consideration for the pr	operty is less than \$50,000
1. OATH	Aware of penalti	ies as set forth by Title 36 64641 V		Foreclosure Sale	
	our knowledge and	ies as set forth by Title 36 §4641-K, we here d belief, it is true, correct, and complete. Gra	ntee(s) and Grantor(s) o	we have each examined r their authorized agent	I this return and to the best of (s) are required to sign below:
	Grantee SHAW	N KEENAN Date 11/30/2	2017 Grantor KNC	OX S MICHAELA	Date 11/30/2017
2 DDEDARE	Grantee	Date11/30/2	017 Grantor KNC	OX C SHAWN	Date 11/30/2017
12. PREPARER	Name of Preparer	JENNIFER HANELY		Number <u>(207) 563-74</u>	
	Mailing Address	PO BOX 425 DAMARISCOTTA, ME 04543		Address <u>jennifer@leve</u>	squelaw.com
		27 MICHARDOUT IA, MIC 04343	Fax Nur	mber	