#### PROCESSED DLN: 1001840026085 ONLINE. DO NOT RE-PROCESS.

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

Registry	Sagadahoc
Date Recorded	05/01/2018
Time Recorded	09:46:00 AM
Transfer Tax Amount	\$726.00
Document Number	2018R-02783
Book	2018

DE.	TTD	TITLE 36, M.R.S.A. SE	CTIONS SS 44	5 A 1 A C	4111	Ti	me Recorded	09:46:00	) AM
1/1	110	111LE 30, IVI.N.3.A. 3E	C110N3 9940	04 I -404	7 T	ransfer	Tax Amount	\$726.00	
Sagadaho	С				- 1	Docum	nent Number	2018R-0	2783
1. County								2018	
BATH									
2. Municipality	/Township						_	2783	-
3. GRANTEE/						Be	OOK/PAGE—REG	JISTRY USE ON	ILY
PURCHASER	ARSENAULT 3a) Name (LAST)	MAX (FIRST)				E (MI)	3b) SSN or Fede	ral ID	
	JONES 3c) Name (LAST)	JESSICA (FIRST)				L mi)	3d) SSN or Fede	ral ID	
	PO BOX 101  3e) Mailing Address								
	ВООТНВАУ							0453	7
	3f) City						ME 3g) State	3h) Zip C	
4. GRANTOR/	CXX/ATAA	TDANG						311/2100	oue T
SELLER	SWAIM 4a) Name (LAST)	TRAVIS (FIRST)				A MI)	4b) SSN or Fede	ral ID	
	SWAIM	SOPHIA				Е			
	4c) Name (LAST)	(FIRST)				MI)	4d) SSN or Fede	rai ID	
	39 DUMMER S	TREET							
	4e) Mailing Address								
	BATH						ME	0453	
5. PROPERTY	4f) City						4g) St		p Code
J. FROFERTT	26 5a) Map	Block Lot	Sub-Lot	d		perty beir	er the code numbe ig <b>sold</b> . (See instruc	tions)—»	01
	52 ELM STREI	ET		$\neg$ $\vdash$	No tax ma Multiple p	arcels	0.09		
	5c) Physical Location			L	Portion of	parcel	5d) Acreage		
6. TRANSFER TA	X 6a) Purchase Price	e (If the transfer is a gift, ente	er "0")		6	5a \$10	65,000		.00
	6b) Fair Market Va if 6a) was of nomi	lue (enter a value <b>only</b> if you	u entered "0" i	n 6a) or		ь			.00
	·	•		!		L		1 1 .	
	oc) Exemption Claim	n – Check the box if either	grantor or gran	ree is cla	ıımıng exemp	ition from	n transfer tax and	d explain.	
	·								
7. DATE OF TRA  04  MONTH	30 2018 DAY YEAR	8. WARNING TO BUYER-If t front a substantial financial	he property is c penalty could b	lassified be trigge	as Farmland, red by develo	Open Spa opment, s	ace, Tree Growth ubdivision, parti	tion or change	Vater- e in use. ASSIFIED
	UMSTANCES—Were there	any special circumstances	10. IN	ICOME T	AX WITHHEL	<b>D</b> - Buyer	(s) not required		
	hich suggest that the price ket value? If yes, check the l	paid was either more or less				incon	ne tax because:		
criari ita ian man	ter value. If yes, effect the	yox and explain.					ified as a Maine r een received fror		c Assessor
							for the property		
11 OAT!						osure Sa			
11. OATH	Aware of penalties as our knowledge and bel	s set forth by Title 36 §4641-K, ief, it is true, correct, and compl	we hereby swealete. Grantee(s) a	ar or affii and Gran	rm that we ha ntor(s) or thei	ve each oriz	examined this re red agent(s) are r	turn and to th	n below
	Grantee TRAVIS A		E 101 10010	Grantor	MAXE			Date05/	
	Grantee SOPHIA E		E 10 1 10 0 1 0	Grantor	JESSICA				01/2018
12. PREPARER	Name of PreparerJI	EFFREY VIGUE			Phone Numb	er(207	7) 518-9098		
	Mailing Address	JOHN ROBERTS ROAD, SUI	ITE 3A		E-Mail Addre	ss _jeff(	@preferredtitlean	dclosing.com	
	S	OUTH PORTLAND MF 04106			Fast Nicean In a s				

Merits: 0011851107207 Trips: 7181730070015



		1001	ATE TRANSFER T ECLARATION	AX   5	1/12018	10:40 AM
	TTD	36 M.R	.S. §§ 4641-4641N		2018 R-	02797
1. County			<del></del>	<del></del>	Transfer	
SAGADA	HOC				State of Maine	Transfer Tax
2. Municipality	/Township				(2010	2707
BATH					(2018-	-2191)
3. GRANTEE/ PURCHASER	3al Name LAST or BUSIN CLARK, AI 3c) Name LAST or BUSIN	NDREW S.			BOOK/PAGE—REGISTS —	RY USE ONLY
	3el Mailing Address after 6 PEARL S 3f) city BIDDEFORI				3g) StateME	, 3D) ZHZ QORE
4. GRANTOR/ SELLER	4c) Name LAST or BUSIN  4e) Mailing Address	PROPERTIES,			_	
	4f) City SACO	SIREEI SO			4g) State	4h) ZIP Code 0 4 0 7 2
5. PROPERTY	27 <sub>1</sub> 5c) Physical Location  816 MIDDL	Block Lot	5ub-Lot 62,	describes the property by Check any that apply:  No tax maps exis  Multiple parcels  Portion of parcel	ſ	\$}->
6.TRANSFERTA	6a) Purchase P	rice (If the transfer is a gi : Value (enter a value onl		6a -		.00.
	if 6a) was of no		-	6b		96700.00,
LLC to MEME	BER/OWNER 70 S					
	ANSFER (MM-DD-YYYY 9-2018		/ER-if the property is class nancial penalty could be tr			
9. SPECIAL CIRC	CUMSTANCES-Were th	ere any special circumstanc rice paid was either more or he box and explain;		Seller has qu	ome tax because: ualified as a Maine resid	lent
				Consideration Foreclosure		ess than \$50,000
11. OATH	Aware of penaltic our knowledge and Grantee	s as set forth by 36 M.R.S. belief it there, correct, and	54641-K, we hereby swear complete. Grantee(s) and pate 4-30-18 Gran	Grantorus or their author	prixed agents) are requ	urn and to the best of lired to sign below: Date 4-30-45
	Grantee		ate Gran	ntor		Date
12. PREPARER	Name of Preparer .	RST CHOICE TITLE CO,		Phone Number 207	-222-2901	
_	Mailing Address •	30 MAIN STREET		Email Address		
		GORHAM, ME 0403	<del>, , , , , , , , , , , , , , , , , , , </del>	Fax Number		
Rev. 12/	15	http://www.maine.gov/	revenue/propertytax/tra	nsfertax/transfertax.htm	n	

#### **PROCESSED** ONLINE. DO NOT RE-PROCESS.

DLN: 1001840026174

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

Registry	Sagadahoc
Date Recorded	05/01/2018
Time Recorded	03:17:00 PM
Transfer Tax Amount	\$730.40
Document Number	2018r-02809
Book	2018
Page	2809
BOOK/PAGE—REG	

<u>RE</u>	TTD	TITLE 36, M.R.S.A. SECTIONS §	§4641-4641N			\$720.40	
Sagadaho	\ <u>^</u>			Transfer	Γax Amount	\$/30.40	
1. County	<u> </u>			Docum	ent Number	2018r-0280	)9
				-	Book	2018	
BATH	- <del> </del>				Page	2809	
2. Municipality	//Township			ВС	•	ISTRY USE ONLY	
3. GRANTEE/ PURCHASER							
	SWAIM 3a) Name (LAST)	TRAVIS		A			
		(FIRST)		(MI)	3b) SSN or Feder	al ID	
	SWAIM 3c) Name (LAST)	SOPHIA (FIRST)		E (MI)	3d) SSN or Feder		
	39 DUMME	····			sa) ssin or reaer	al ID	
	3e) Mailing Address	K STREET					
	BATH			,	ME	04530	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/	BRETON	LINDA		A			
SELLER	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	al ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
	127 MACKE	ENZIE LANE					
	4e) Mailing Address						
	WOOLWICI	$\Xi$			ME	04579	
	4f) City				4g) Sta	ate 4h) Zip Co	de
5. PROPERTY	21	149		pe of property—Ente bes the property being			
	5a) Map	Block Lot Sub-Lot	Check ar	ny that apply:		202	
	39 DUMME	R STREET		o tax maps exist Jultiple parcels	0.18		
	5c) Physical Location		Po	ortion of parcel	5d) Acreage		
6. TRANSFER TA	AX 6a) Purchase f	Price (If the transfer is a gift, enter "0")		6a \$16	6,000		.00
		et Value (enter a value <b>only</b> if you entered)	"0" in 6a) or	ΨΤΟ			] .00
	if 6a) was of n		0 111 00, 01	6b			.00
	бс) Exemption	claim – Check the box if either grantor or	grantee is claimin	a exemption from	transfer tax and	l explain.	_
				,		•	
7 DATE OF TRA	ANSFER (MM-DD-YYYY	/\ 9 WARNING TO BLIVER If the property	via alaccifod as Fo	waland Ones Cae	an Tunn Currett		
04	30 2018	8. WARNING TO BUYER-If the property front a substantial financial penalty cou					
MONTH	DAY YEAR					CLASSII	FIED
			0. INCOME TAX W	<b>/ITHHELD</b> – Buyer(		ιο withhold Mainε	9
	vnich suggest that the p ket value? If yes, check	orice paid was either more or less the box and explain:	F	incom Seller has qualif	e tax because: ied as a Maine re	esident	
			Ĺ			n the State Tax Ass	sessor
			-			is less than \$50,00	00
11. OATH	Aware of nonciti	es as set forth by Title 36 §4641-K, we hereby	curar or affirm th	Foreclosure Sale		turn and to the fi	act of
valii	our knowledge and	es as set forth by 11tle 36 94641-K, we nereby I belief, it is true, correct, and complete. Grante	swear or ainrm th e(s) and Grantor(s	iat we nave each e s) or their authorize	xammed this ref ed agent(s) are re	turn and to the be equired to sign be	est of elow:
	Grantee LINDA		8 Grantor TF			Date05/02/	2018
	Grantee	Date		OPHIA E SWA		Date 05/02/	2018
12. PREPARER	Name of Preparer .			ne Number <u>(207</u>			
	Mailing Address	6 CITY CENTER SUITE 400	E-Ma	ail Address <u>jhopl</u>	kinson@hablaw.	com	<del></del> -
		PORTLAND, ME 04101	Fax i	Number			

# PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840026452

# MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	05/04/2018
Time Recorded	11:25:00 AM
fer Tax Amount	\$0.00

RF'	TTD	TITLE 36, M.R.S.A. SECTIONS §§4641-464	1 N	Time Recorded	11:25:00 A	<u>M</u>
			Trans	sfer Tax Amount	\$0.00	
Sagadaho	c		Do	ocument Number	2018R-028	362
1. County				Book	2018	
BATH					2862	
2. Municipality	/Township			_		
3. GRANTEE/				BOOK/PAGE—REC	JISTRY USE UNLY	
PURCHASER	<b>FULLER</b>	MEGAN	Е			
	3a) Name (LAST)	(FIRST)	(MI)	3b) SSN or Fede	eral ID	
	3c) Name (LAST)	(FIRST)	(MI)	3d) SSN or Fede	eral ID	
		MILL ROAD				
	3e) Mailing Address		11-11			$\neg$
	BATH 3f) City			ME		
4. GRANTOR/				3g) State	3h) Zip Code	
SELLER	FULLER	MARC	E			
	4a) Name (LAST)	(FIRST)	(MI)	4b) SSN or Fede	ral ID	
	4c) Name (LAST)	(FIRST)	(MI)	4d) SSN or Fede	ral ID	
	74 LONG ST	TREET				
	4e) Mailing Address	· · · · · · · · · · · · · · · · · · ·			<del></del>	$\neg$
	BRUNSWIC	K		ME		
5. PROPERTY	4f) City			4g) Si		de
S. PROPERTY	07	057     des	scribes the property	—Enter the code numbe y being <b>sold</b> . (See instru		
	5a) Map	Block Lot Sub-Lot Chec	k any that apply No tax maps ex		<u> </u>	
	89 VARNEY	MILL ROAD	Multiple parce	l l	}	
	5c) Physical Location		Portion of parc	el 5d) Acreage		
6. TRANSFER TA	X 6a) Purchase F	Price (If the transfer is a gift, enter "0")	6a	\$0		.00
		t Value (enter a value <b>only</b> if you entered "0" in 6a) or	~ L			]
	if 6a) was of no		6b	\$169,400		.00
	6c) Exemption	claim – $\overline{X}$ Check the box if either grantor or grantee is clair	ning exemption	from transfer tax and	d explain	_
Title 36: 8		). Deed between spouses in a divorce pro			а слрат.	
,						
	NSFER (MM-DD-YYYY	<ol> <li>8. WARNING TO BUYER-If the property is classified as front a substantial financial penalty could be triggere</li> </ol>				
MONTH	30   2018 DAY YEAR		, ,	, , , , , , , , , , , , , , , , , , , ,	CLASSI	
9. SPECIAL CIRC	UMSTANCES—Were th		X WITHHELD-	Buyer(s) not required	to withhold Main	e
	hich suggest that the p ket value? If yes, check	orice paid was either more or less		ncome tax because:	vocidont	
and its fall mon	nee value. If yes, effect	the box and explain.		qualified as a Maine las been received fro		sessor
				tion for the property		
			Foreclosu			
11. OATH	Aware of penaltic	es as set forth by Title 36 §4641-K, we hereby swear or affirn I belief, it is true, correct, and complete. Grantee(s) and Grant	n that we have e	each examined this re	eturn and to the b	est of
			MEGAN E I		Date 05/07	
	Grantee	Date 05/07/2018 Grantor			Date 05/07/	
12. PREPARER	Name of Preparer		hone Number	(207) 772-5845	Date	
	Mailing Address			jhopkinson@hablaw	.com	
		DODMI AND ACCOUNT	ax Number _			

Merits: 0011851108415 Trips: 7181730070031

		00

* 1 RE	L2RETTD*	MAINE REVEN 00 REAL ESTATE 1 DECLA 36 M.R.S. §§	RATION		05/04/2018 : 2018R-C Transfer Tax <	2868 of 756.80
SAGADA	HOC				SAGADAHOC COL	
2. Municipality	/Township			-		. \
BATH		47			(2018-	-2868)
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINE  WILLIAMS,	ss, first, mi KATHLEEN E.	·		BOOK/PAGE—REGIST	RY USE ONLY
	1	purchase of this property				
	3f) City				agi State_	2ul til roas
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINE CONOVER, 4c) Name, LAST or BUSINE	MARSHA J.				,
	4e) Mailing Address 35 SCHOON 4f) City  DAMARISCO	ER STREET, APS	r. #107		4g) State ME	4h) ZIP Code 0 4 5 4 3
5. PROPERTY	5a) Map  16  5c) Physical Location  25 SPRING	Block Lot 45 VIEW LANE #3			kist 5d) Acreage	
6.TRANSFERTA	XX 6a) Purchase Pri	ice (if the transfer is a gift, ente	r"0")	6a	1	72000.00
	•	Value (enter a value <b>only</b> if you		f 6b		.00.
	6c) Exemption cla	aim – Check the box if either	grantor or grantee is cl	alming exemption	from transfer tax and ex	oplain.
7. DATE OF TRA	ANSFER (MM-DD-YYYY)  SL- 2018  DAY YEAR	8, WARNING TO BUYER-If the front a substantial financial p	e property is classified penalty could be trigge	l as Farmland, Ope ered by developme	n Space, Tree Growth, or ent, subdivision, partitio	Working Water- n or change in use.  CLASSIFIED
in the transfer v		ice paid was either more or less 🗀	10. INCOME	i ✓: Seller has I · A waiver h	Buyer(s) not required to vanceme tax because: qualified as a Maine resions to be been received from the property is left as also been received from the property is left as also been the property is left as also been received from the property is left as also been received from the property is left as also been received from the property is left as also been received from the property is left as also been received from the property is left as also been received from the property is left as a	dent he State Tax Assessor
11. OATH		s as set forth by 36 M.R.S. 5 4641-i elief, it is true, correct, and comple Date		ntor(s) or their aut  Malu	horized agent(s) are req	
12. PREPARER	Name of Preparer M	lerrymeeting Midcoast Title, LLC  3 Pleasant Street	- Grantor	Phone Number_2	07-729-1667 Iv@midcoasttitle.com	
		Brunswick, ME 04011			207-729-8339	

Rev. 12/15

Merits: 0011851107510 Trips: 7181730070021

	00 L2RETTD*	MAINE REVENUE SI REAL ESTATE TRANS DECLARATIO 36 M.R.S. §§ 4641-4	SFER TAX N		4-1-1-1	
1. County	TIAA				05/04/2018 2018 —	2884)
SAGADA	HUC				Transfer Tax	
2. Municipality	/Township				State of Maine SAGADAHOC CO	
BATH						
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRE HAGERTHY II. 3c) Name LAST or RUSINESS, FIRE	, DANA T		BOO	OK/PAGE—REGISTR	Y USE ONLY
	3f) City BATH	STREET			agy state	30) 212 COGE 0 4 5 3 0
4. GRANTOR/ SELLER	4e) Mailing Address 47 EASTERN A	MILIE E HOWARD			1	
E PROPERTY	4f) City AUGUSTA  Sa) Map Bloc	k Lot Sub-Lc	at Sh Time	of proparty. Enter	4g) State ME the code number that	4h) ZIP Code 0 4 3 3 0
5. PROPERTY	28 Sc) Physical Location 53 COURT STR	109	describes Check any No t	the property being that apply: ax maps exist tiple parcels on of parcel	sold. (See instructions 5d) Acreage	202
6. TRANSFER TA	X 6a) Purchase Price (if	the transfer is a gift, enter "0")		ба	-	31500.00
	-	(enter a value only if you entered	l"0" in 6a) or	6b		.00.
	6c) Exemption claim -	Check the box if either grantor or	grantee is claiming	exemption from t	ransfer tax and exp	iain.
O4 MONTH	30 20/8 DAY YEAR	3. WARNING TO BUYER-If the propert front a substantial financial penalty co	ould be triggered by	development, sub	odivision, partition	or change in use.  CLASSIFIED
in the transfer w	:UMSTANCES—Were there any which suggest that the price pai ket value? If yes, check the box	d was either more or less		income Seller has qualific A waiver has been	tax because: ed as a Maine resid	ent e State Tax Assessor
11. OATH	our knowledge and belief, i Grantee	forth by 36 M.P.S. § 4641-K, we here git ue, correst and complete. Grant Han Will Hate 4-30-1 Date	Grantor Special	tiner authorized Administrator	dagent(s) are requi	rn and to the best of red to sign below: rate 130 8 rate
12. PREPARER	Name of Preparer	. Bridges, Esq.	Phone	Number 207-626-	8134	
I	Mailing Address 47 East	em Ave. ta, ME 04330	Email /	007.00	@roadrunner.com 6-8134	

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

Rev. 12/15

DLN: 1001840026400

Registry	Sagadahoc
Date Recorded	05/04/2018
Time Recorded	02:32:00 PM
nsfer Tax Amount	\$228.80

DO NOT	DE DDOCECC					1	Date	ccorded .	03/04/201	<u> </u>
DO NOT RE-PROCESS.  RETTD			<b>DECLARATION</b> TITLE 36, M.R.S.A. SECTIONS §§4641-4641N				Time F	Recorded	02:32: <u>0</u> 0 F	·Μ
		IIILE 36				Trai	Transfer Tax Amount \$228.8			)
Sagadaho	oc							-	2018r-028	<del></del> 85
1. County						4		Book		
BATH								-		
2. Municipality	//Township						BOOK/	Page _	STRY USE ONLY	
3. GRANTEE/ PURCHASER							00010	AGENEGI.	-	
	O'REILLY 3a) Name (LAST)		RODERIC (FIRST)	CK		J (MI)	3b)	SSN or Federa	al ID	
	O'REILLY 3c) Name (LAST)		SYLVIA			J (MI)	3d)	SSN or Federa	al ID	
	409 MENEND  3e) Mailing Address	EZ STREE	T, APT. 10	7						
	VENICE 3f) City							FL 3g) State	34285 3h) Zip Code	
4. GRANTOR/ SELLER	PENNIMAN 4a) Name (LAST)		JOHN (FIRST)			B (MI)	4b)	SSN or Federa		
	4c) Name (LAST) 726 MIDDLE		(FIRST)			(MI)	4d)	SSN or Federa	ıl ID	<u> </u>
	4e) Mailing Address BATH							ME	04530	
5. PROPERTY	4f) City					T		4g) Stat		ode
J. FROPERT	34 5a) Map	Block	7 Lot	Sub-Lot	desci	Type of propert ribes the proper any that app	rty being <b>sol</b>			
	6 TARBOX ST	TREET				No tax maps : Multiple parc Portion of par	els cel	0.12		
6. TRANSFER TA	5c) Physical Location					<u>'</u>		d) Acreage		7 00
	6a) Purchase Pri		-			6а	\$52,00	90		00. [
	6b) Fair Market V if 6a) was of non		lue <b>only</b> if you	u entered "0	" in 6a) or	6b				00.
	6c) Exemption cla	im – 🔲 Check t	he box if either	grantor or gr	antee is claim	ing exemptio	n from tran	sfer tax and	explain.	
05 MONTH	ANSFER (MM-DD-YYYY) 04 2018 DAY YEAR	front a subs	STO BUYER-If th tantial financial p	penalty could	d be triggered	by developn	nent, subdiv	vision, partiti	ion or change in	use. IFIED
in the transfer w	CUMSTANCES—Were ther which suggest that the prick ket value? If yes, check the	e paid was either	more or less	10.	INCOME TAX	X Seller ha	income tax s qualified a has been re ation for th	because: as a Maine re eceived from	o withhold Main sident the State Tax As s less than \$50,0	ssessor
11. OATH	Aware of penalties our knowledge and be Grantee JOHN B P	elief, it is true, cor	rect, and completed by Date 0:	we hereby sv ete. Grantee( 5/07/2018 5/07/2018	s) and Grantor $\frac{F}{G}$	that we have (s) or their au RODERICE SYLVIA J	ıthorized aç ζ J O'REI	jent(s) are re LLY	quired to sign b Date 05/07	elow: /2018_
12. PREPARER	Grantee Name of Preparer	JOHN T. VOORH				one Number			_ Date	2010
		13 PLEASANT S				Mail Address		nidcoasttitle.	.com	
	<del>-</del>	BRUNSWICK, M	E 04011			Mumbor				

#### **PROCESSED** ONLINE. DO NOT RE-PROCESS

DLN: 1001840026623

Registry	Sagadahoc
Date Recorded	05/08/2018
Time Recorded	09:42:00 AM
Transfer Tax Amount	\$638.00
Document Number	2018r-02979
Book	2018
Page	2979

	TTD	DECLAR		т	ime Recorded	09:42: <u>0</u> 0 A	M
RE	<u> </u>	TITLE 36, M.R.S.A. SEC	HONS \$\$4641-464	Transfe	r Tax Amount	\$638.00	
Sagadaho	c			Docu	ment Number	2018r-0297	79
1. County						2018	
BATH		,					
2. Municipality	/Township		•		_	2979	
3. GRANTEE/					BOOK/PAGE—REG	ISTRY USE OINLY	
PURCHASER	CONGDON 3a) Name (LAST)	MATTHEW (FIRST)	V	S	21-7 (6)7 5-1	-UD	
				(MI)	3b) SSN or Feder	aliu	
	CONGDON 3c) Name (LAST)	EMILY (FIRST)		V (MI)	3d) SSN or Feder	al ID	
	42 LAMB ST	,			34, 33, 40, 1 6461	ario	
	3e) Mailing Address						
	WESTBROOK				ME	04092	
-	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	WYMAN	ALBERT		D			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	al ID	
	WYMAN	LISABETH		Α			ĺ
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
	48 CHESTNUŢ	ST					
	4e) Mailing Address						
	BATH			•	ME_	04530	
5. PROPERTY	4f) City			Type of property—E	4g) Sta		ae
	25	286	des	scribes the property be k any that apply:			
	5a) Map	Block Lot	Sub-Lot	No tax maps exist			
	48 CHESTNUT	STREET		Multiple parcels Portion of parcel	0.00		
4	5c) Physical Location		<u> </u>	Tortion of pareer	5d) Acreage		
6. TRANSFER TA	6a) Purchase Price	e (If the transfer is a gift, enter	"0")	6a \$	145,000		.00
	6b) Fair Market Va if 6a) was of nomi	lue (enter a value <b>only</b> if you	entered "0" in 6a) or	ch			.00
	,	,		6b			] .00
	6c) Exemption clain	n – Check the box if either g	rantor or grantee is clai	ming exemption fro	om transfer tax and	l explain.	
	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the front a substantial financial per					
MONTH	04 2018 DAY YEAR	none a substantial maneral pe	enalty could be inggere	ed by development	, subdivision, parti		
9. SPECIAL CIRC	UMSTANCES—Were there		10. INCOME TA	X WITHHELD- Buy	er(s) not required	to withhold Maine	2
	hich suggest that the price ket value? If yes, check the l	paid was either more or less			ome tax because: alified as a Maine r	acidont	
	ter raider in yes, aneen the			<u></u>	been received fror		sessor
				Consideratio Foreclosure S	n for the property	is less than \$50,00	00
11. OATH	Aware of penalties as	s set forth by Title 36 §4641-K, w	e hereby swear or affirr	n that we have eac	h examined this re	turn and to the be	est of
	our knowledge and beli	ief, it is true, correct, and complet	e. Grantee(s) and Grant	or(s) or their autho	rized agent(s) are r	equired to sign be	elow:
	Grantee ALBERT D	A 33/3/3/AA3/	/00/2010	MATTHEW S		Date05/08/	
12. PREPARER	Gidifice	EATHER SHAFFER	/08/2018 Grantor _	EMILY V CO		Date05/08/	2010
A THEFAREN		EATHER SHAFFER 07 SABLE OAKS DRIVE, SUITE		Phone Number <u>(2</u> E-Mail Address <u>he</u>		n	
	maining madress	OUTLI DODTI AND ME 04100		- maii Audiess			

DLN: 1001840026642

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

Registry	Sagadahoc
Date Recorded	05/08/2018
Time Recorded	11:16:00 AM
ransfer Tax Amount	\$748.00
Document Number	2018r-02982
	2018

DO NOT.	RE-PROCESS.	DECLA	RATION		Time Recorded	11.16.00 A	M
RE'	ГTD	TITLE 36, M.R.S.A. SEC	CTIONS §§4641-46	41N			.IVI
Sagadaho	C				sfer Tax Amount		
1. County				D	ocument Number	2018r-0298	32
BATH					Book	2018	
2. Municipality	/Township	· · · · · · · · · · · · · · · · · · ·			Page	2982	
3. GRANTEE/					BOOK/PAGE—REG	ISTRY USE ONLY	
PURCHASER	WINDWARD 3a) Name (LAST)	PROPERTIES LLC		(MI)	3b) SSN or Fede	ral ID	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	ral ID	
	P.O. BOX 522				*		
	3e) Mailing Address						
	YARMOUTH				ME	04096	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	
SELLER	SAGADAHOC 4a) Name (LAST)	CK REAL ESTATE AS	SSOCIATION	(MI)	4b) SSN or Feder	ral ID	
	4c) Name (LAST)	(FIRST)		(Mi)	4d) SSN or Feder	ral ID	
	53 FRONT ST			, , ,	44, 3314 01 1 cdc1	idi ib	
	4e) Mailing Address						,
	BATH				ME	04530	
	4f) City				4g) St.	ate 4h) Zip Co	de
5. PROPERTY	26	246	d	lescribes the proper	y—Enter the code numbe ty being sold. (See instruction		
	5a) Map	Block Lot	Sub-Lot Ch	eck any that appl No tax maps e	•		
	160 FRONT ST	ΓREET	1	Multiple parce	els 0.09		
	5c) Physical Location			Portion of par	cel 5d) Acreage		_
6. TRANSFER TA	X 6a) Purchase Pric	e (If the transfer is a gift, ente	er"0")	ба	\$170,000		.00
		alue (enter a value <b>only</b> if you	u entered "0" in 6a) or				1
	if 6a) was of nom	<b>-</b> ,		6b			.00
	бс) Exemption claiı	m – Check the box if either	grantor or grantee is cla	aiming exemption	n from transfer tax and	l explain.	
	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the front a substantial financial					
05 MONTH	04 2018 DAY YEAR		penanty could be ingge	red by developin	ient, subulvision, parti		
9. SPECIAL CIRC	UMSTANCES—Were there	e any special circumstances	10. INCOME T	AX WITHHELD-	Buyer(s) not required	to withhold Maine	2
	hich suggest that the price ket value? If yes, check the	e paid was either more or less box and explain:			income tax because: s qualified as a Maine r	esident	
	·	, Ц			has been received fror		sessor
				Consider Foreclosu	ation for the property	is less than \$50,00	00
11. OATH		es set forth by Title 36 §4641-K, v		rm that we have	each examined this re		
		elief, it is true, correct, and comple HOCK REAL ESTATE AS					
	Grantee SAGADA		5/08/2018 Grantor		IN FROPERITES	Date05/08/	
12. PREPARER		ERIC SCHAEFFER	Giantor		(207) 846-3460	Date	
	•	5 FOREST FALLS DRIVE		E-Mail Address	closings@douglastitl	e.com	

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

Fax Number

YARMOUTH, ME 04096

#### **PROCESSED** ONLINE. DO NOT RE-PROCESS

DLN: 1001840026765

Registry	Sagadahoc
Date Recorded	05/09/2018
Time Recorded	12:42:00 PM
Γransfer Tax Amount	\$387.20
Document Number	2018r-03005
	2018

	re inoced	DECEMBATION			Time Recorded	12:42:00 P	<u>M</u>
KE	TTD	TITLE 36, M.R.S.A. SECTIONS	§§4641-4641N	Tran	sfer Tax Amount	\$387.20	
Sagadaho	c				ocument Number		)5
1. County							, <u>,,,</u>
BATH						2018	
2. Municipality	/Township				Page	3005	
3. GRANTEE/					BOOK/PAGE—REG	ISTRY USE ONLY	
PURCHASER	RYTKY 3a) Name (LAST) RYTKY	BRUCE (FIRST)  DANIEL		W (MI)	3b) SSN or Fede	ral ID	
	3c) Name (LAST)	(FIRST)		A (MI)	3d) SSN or Feder	ral ID	
	231 HIGH S	TREET			,		
	3e) Mailing Address						
	BATH				ME	04530	
4 CDANTOD/	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	CARTER 4a) Name (LAST)	JOHN (FIRST)		F (MI)	4b) SSN or Feder	ral ID	
	CARTER	PATRICE		W			
	4c) Name (LAST)  204 CROSS  4e) Mailing Address	POINT ROAD		(MI)	4d) SSN or Feder	rai ID	
	EDGECOME	3			ME	04556	
5. PROPERTY	4f) City				4g) St —Enter the code numbe		de
	5a) Map  61 OFFICE I  5c) Physical Location	Block Lot Sub-	describ Check ar No		y being <b>sold</b> . (See instruction): xist 0.15		
6. TRANSFER TA	X 6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a	\$88,000		.00
	6b) Fair Marke	t Value (enter a value <b>only</b> if you entere	ed "0" in 6a) or	<u>[</u>			] ] .
	if 6a) was of no	_ ^		6b [			.00
T DATE OF TO		claim – Check the box if either grantor					
05 MONTH	NSFER (MM-DD-YYYY 09 2018 DAY YEAR	8. WARNING TO BUYER-If the prope front a substantial financial penalty	,				use.
in the transfer w		nere any special circumstances orice paid was either more or less the box and explain:	10. INCOME TAX W	Seller has A waiver h	Buyer(s) not required income tax because: qualified as a Maine ras been received fror the property re Sale	esident m the State Tax As	sessor
11. OATH	our knowledge and	es as set forth by Title 36 §4641-K, we herel I belief, it is true, correct, and complete. Grar	ntee(s) and Grantor(s	) or their aut	thorized agent(s) are r	equired to sign b	elow:
		CARTER Date 05/09/20				Date 05/09/	
12 0000:000	Grantee	CE W CARTER Date 05/09/20	Granter	ANIEL A		Date05/09/	2018
12. PREPARER	Name of Preparer .	JAMES HOPKINSON			(207) 772-5845		
	Mailing Address	6 CITY CENTER SUITE 400			jhopkinson@hablaw	.com	
		PORTLAND, ME 04101	Fax N	Number .			

Merits: 0011851109128 Trips: 7181730070057



# MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	######################################	DECLARATION	X	
RE'	TTD	36 M.R.S. §§ 4641-4641N		
1. County		And and a second		05/10/2018 09:54 AM\ 2018 — 3018\
SAGADA	HOC			Transfer Tax of 338.80
2. Municipality	/Township			State of Maine Transfer Tax SAGADAHOC COUNTY MAINE
BATH				SASADANOC COGNII MAINE
3. GRANTEE/ PURCHASER	3a) Name LAST of BUSINESS, FI LYONS PRIDE			BOOK/PAGE—REGISTRY USE ONLY
	3c) Name, LAST or BUSINESS, Fil	RST. MI		
	Jel Mailing Address after purch C/O MITCHEL 3f) City	ase of this property. L LYONS, 12 OAK RIDG	E ROAD	adi zrare aul vir roos
	BRUNSWICK			ME 04011
4. GRANTOR/ SELLER	4at Name, LAST of BUSINESS, FI			
	4c) Name, LAST or BUSINESS, FI	RST.MI		
	4e) Mailing Address 21 MARSHALL	AVENUE		
	4f) City			49) State 4h) ZIP Code ME 04530
	BATH			ME 04530
5. PROPERTY	20 Sc) Physical Location	Lot Sub-Lot C		xist 5d) Acreage
6. TRANSFER TA	AX 6a) Purchase Price (I	f the transfer is a gift, enter "0")	6a	77000.00
	6b) Fair Market Value if 6a) was of nomina	e (enter a value <b>only</b> if you entered "0" in 6a) o I value)	or 6b	.00
	6c) Exemption claim –	Check the box if either grantor or grantee is	1. daiming exemption	from transfer tax and explain.
			* * * * * * * * * * * * * * * * * * * *	
7. DATE OF TRA 0.5-08	ANSFER (MM-DD-YYYY) 3-2018 DAY YEAR	8. WARNING TO BUYER-If the property is classified front a substantial financial penalty could be trigg		
in the transfer v	CUMSTANCES—Were there an which suggest that the price pa ket value? If yes, check the bo	aid was either more or less	i i	Buyer(s) not required to withhold Maine ncome tax because: qualified as a Maine resident
				as been received from the State Tax Assessor tion for the property is less than \$50,000 re sale
11. OATH	our knowledge and belief Grantee COUNT	et forth by 36 M.R.S. § 4641-K, we hereby swear or by a true, correct, and complete. Grantee(s) and complete. Grantee(s) and complete. Grantee(s) and complete Grantee(s) and	ratiton(s) or their aut or Accordance	horized agent(s) are required to sign below:  Date
12. PREPARER	Name of Preparer Jenny B		FROME NUMBER _	07.443.3333
_	Mailing Address	ntre Street	Email Address 2	ennyburch207@gmail.com
	Batn,	ME 04530	Fax Number	207.443.3333

Rev. 12/15

Merits: 0011851109734 Trips: 7181730070069

					00
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# MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	L2RETTD*		DECLARATION		_		_
	TTD	TITLE 36, 1	V.R.S.A. SECTIONS §§	4641-4641N	5110	)1/8	2:20P.M
1. County		<u> </u>		<u> </u>	$\ddot{\mathcal{A}}$	2188	03029
SAGADA	HOC					Transfe	Tax of
2. Municipality	/Township	<del></del>			Stat	e of Main	r Tax of Care Tax e Transfer Tax MAINE
BATH					SAGO	2018-	_3029)
3. GRANTEE/					вб		GISTRY USE ONLY
PURCHASER	3a) Name LAST or BUSINES KINDLIMAN 3c) Name LAST or RUSINES	N, MELIS		ne E			·
	Jurcotte, 3el Mailing Address 277 MIDDLI	Tegy L E STREET	+ William.	D			
	BATH	-2		77.34 <b>18</b> (19 18 17 18 18 18 18 18 18 18 18 18 18 18 18 18		ME	04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINES KINDLIMANI 4c) Name, LAST or RUSINES Turcette, 4e) Mailing Address 277 MIDDLI	N, MELIS S.FIRST.MI Peggy 2	SA A. + Sha. + W. Iliam D	ne E			
	4f)City BATH					49) S MF	
5. PROPERTY	5c) Physical Location 277 MIDDLE	STREET	73 Sub-Lot	describe Check an No Mu	e of property—Enters the property being y that apply: tax maps exist litiple parcels tion of parcel		
6.TRANSFERTA	X 6a) Purchase Pric	e (If the transfer i	s a gift, enter"0")		ба		00.0
		alue (enter a valu	e only if you entered "0"	'in 6a) or	6b		165000.00
	6c) Exemption clai	im – 📝 Check the	box if either grantor or gra	intee is claiming	exemption from	transfer tax an	d explain.
Deeds betwe	en parent/child to	create Joint	Tenancy. No cons	ideration g	iven.		
	NSFER (MM-DD-YYYY) -2018 DAY YEAR		O BUYER-If the property is tial financial penalty could			•	•
in the transfer w	UMSTANCES—Were then hich suggest that the pric ket value? If yes, check the	e paid was either m		NCOMETAX W	income Seller has qualifi A waiver has bee	e tax because: led as a Maine en received fro or the property	to withhold Maine resident m the State Tax Assessor r is less than \$50,000
11.OATH			36 §4641-K, we hereby sw t, and complete. Grantee(s Date 5/10/2018				required to sign below: Date 5/10/2018
	Grantee		Date	Grantor			Date <u>5/10/2018</u>
12, PREPARÉR	Name of Preparer	issa A. Kindilmann 7 Middle Street			e Number 207-504	-0091 =[[s78@gmail.c	
ł	Mailing Address	ath, ME 04530			1 Mudiess	13-1383	

DLN: 1001840027097

Registry	Sagadahoc
Date Recorded	05/15/2018
Time Recorded	10:22:00 AM
ransfer Tax Amount	\$594.00
Document Number	2018r-03123
D1-	2019

	RE-PROCESS.	DECLARATION			Time F	Recorded	10:22:0	0 AM
NE	ITD	TITLE 36, M.R.S.A. SECTIONS §§46	41-4641	Trar	nsfer Tax	Amount	\$594.00	)
Sagadaho  1. County	c			D	ocument	Number	2018r-0	3123
						Book	2018	
BATH	/Town ship					Page	3123	
2. Municipality 3. GRANTEE/	Township			_	BOOK/		ISTRY USE ON	NLY
PURCHASER	FRANCIS 3a) Name (LAST)	ANDREW (FIRST)		T (MI)	3b)	SSN or Feder	ral ID	
	CARVER 3c) Name (LAST)	KRISTIE (FIRST)		L (MI)	34/	SSN or Feder	ral ID	
	478 MIDDLE ST			(Will)	3U)	SSN or Feder	ai ID	
	BATH					ME	0453	0
	3f) City					3g) State	3h) Zip (	
4. GRANTOR/ SELLER	WILSON 4a) Name (LAST)	J. THOMAS		(MI)	4b)	SSN or Feder		
	WILSON	TAMMY		S				
	4c) Name (LAST)	(FIRST)		(MI)	4d)	SSN or Feder	al ID	
	21 WINDMERE	ROAD						
	4e) Mailing Address							
	BRUNSWICK					ME	0401	1
	4f) City					4g) Sta	ate 4h) Z	ip Code
5. PROPERTY	33 5a) Map Blo	158 Sub-Lot	des	Type of property cribes the proper k any that appl No tax maps e	ty being <b>solo</b> y:		that <b>best</b> tions)—» 2	01
	478 MIDDLE ST	REET		Multiple parce Portion of par	els cel	0.50		
6. TRANSFER TA	X	f the transfer is a gift, enter "0")		62	\$134,9			.00
	6b) Fair Market Value	e (enter a value <b>only</b> if you entered "0" in	ба) or	6a	\$134,9			$\dashv$
	if 6a) was of nomina	•		6b			<del>-</del>	00
7 DATE OF TOA	6c) Exemption claim –  NSFER (MM-DD-YYYY)	Check the box if either grantor or grant						
	11 2018 DAY YEAR	8. WARNING TO BUYER-If the property is cla front a substantial financial penalty could be	triggere	d by developm	en Space, II ient, subdiv	ree Growtn, vision, partit	ion or chang	vater- le in use. ASSIFIED
n the transfer wi	UMSTANCES—Were there an hich suggest that the price pa let value? If yes, check the box	nid was either more or less	OME TA)	X Seller has	income tax qualified a has been re ation for th	because: as a Maine re ceived from		x Assessor
11. OATH	our knowledge and belief, Grantee J. THOMAS V	Date of	nd Granto rantor	or(s) or their au ANDREW	thorized ag ΓFRANC	jent(s) are re CIS	equired to sig Date <u></u>	gn below: /15/2018_
2 00004000	Grantee TAMMY S W	Date G		KRISTIE L			Date05/	/15/2018
12. PREPARER	45.70	ODEST FALLS DRIVE		hone Number				
	maning riddress	OREST FALLS DRIVE RMOUTH, ME 04096		-Mail Address	ciosings(a	ydouglastitle	e.com	
		410 0 111, WIL 070/0	Fa	ax Number				

Merits: 0011851167741 Trips: 7181730260083

			MAINE REVEN				05/15/2018 1 2018R-0	
(4)) 4 4	AIII IEII IIIII IIII IIII IIII L2RETTD*	י טטוווו	DECLAF		^		Transfer Tax of	•
RE	TTD	TITL	E 36, M.R.S.A. SEC	FIONS §§4641-4	641N		tate of Maine Tr IGADAHOC COU	
T. County								
SAGADA	HOC							
2. Municipality	/Township		<del></del> .			/ ;	2018-3	3126
BATH					$\neg$   (			
3. GRANTEE/		year,				BOOK	/Page—Registry	USE ONLY
PURCHASER	3a) Name LAST or BUS	SINESS, FIRST, MI POE CO	እስተ <b>ሎኒያ</b> ቸ አገል			1 1		
	CILLEY,		OGHLAN			] ]		
						'		
	3el Mailing Address 124 BRII	GE STR	EET					
	3f) City	744					3g) State	301 ZID CORE 0 4 5 3 0
T. CRINTON!	BATH	CINICC FIRET MI					ME	04330
4. Grantor/ Seller	4a) Name, LAST or BU	ARM ASS	OCIATES			·		
	4c) Name, LAST or BU		TOTINI			, ] :		
	C/O SUSA	AN ST.	JOHN			]		
	4e) Mailing Address 67 GRAN	TTE POT	NT ROAD	· · · · · · · · · · · · · · · · · · ·				
	4f) City				<del></del>	····(	4g) State	4h) Zip Code
		EAD	·····		- Indiana de la composição de la composi		ME	04854
5. PROPERTY	5a) Map	Block	Lot	Sub-Lot	5b) Type of property		code number that	hest [
3. PROPERIT	21		242		describes the proper heck any that apply	y being so		
	5c) Physical Location		+242-	<u></u>	No tax maps e		5d) Acreage	
1	329 FRON'	T STREE	ET		Multiple parce			22
6. TRANSFER TA				7.00.44.00.00.00.00.00.00.00.00.00.00.00.	L. J. Portion of pair	-ei	<u> </u>	
V. ISVANSI EN IA	6a) Purchase	•	ansfer is a gift, enter		6a		35	5000.00
		cet Value (entei nominal value)	r a value <b>only</b> if you : )	entered "0" in 6a) (	or 6b			.00
	6c) Exemption	claim – 🔲 Cl	neck the box if either g	rantor or grantee is o	ر Claiming exemption	from tra	nsfer tax and exp	lain.
F.A. in processor processor.								
	NSFER (MM-DD-YY)		NING TO BUYER-If the					
[	-2018	front a	substantial financial p	enalty could be trigg	gered by developm	ent, subd	ivision, partition	or change in use.  CLASSIFIED
9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were	there any specia	al circumstances	1 10.INCOME	TAX WITHHELD-	Buyer(s) n	ot required to wi	
in the transfer w	which suggest that the ket value? If yes, chec	price paid was	either more or less	Ţ	- Committee		ix because: as a Maine reside	ent
						•		State Tax Assessor
					<del></del>	_	he property is les	s than \$50,000
11. OATH	Aware of new!	tips as set forth	by Title 36 §4641-K, w	e herehy swear or at	Foreclosu		nined this return	and to the hest of
. i, valii	and powledness	al battaf to to tou	THE DO STUTING W	e. Grantee(s) and Gr	antor(s) or their au	thorzett	agent(s) are requi	red to sian below:
	our knowledge at	id deller it is it di	e, correct/and complet	4 0040			~	DE 44 0040
	Grantee /	<u>nuglika (</u>	My Date 05-	11-2018 Granto	(D)			ate 05-11-2018
12. PREPARER	Grantee Grantee	neuglika C	Date	11-2018 Granto	г <mark>Ф</mark>	207-\12-77		ateate
12. PREPARER	Grantee /	neglika C	Date Date	11-2018 Granto	r Phone Number		D D	ate 05-11-2018

DLN: 1001840026883

Registry	Sagadahoc
Date Recorded	05/16/2018
Time Recorded	11:03:00 AM
ransfer Tax Amount	\$805.20
Document Number	2018r-03145
Book	2018

	RE-PROCESS	•	DECLA	ARATION				Time	Recorded	11:0	3:00 A	M
RE	TTD	TITLE 36,	M.R.S.A. SE	CTIONS §§	4641-46	541N	Trar		Amount			
Sagadaho	ОС								t Number			15
1. County					<u> </u>				Book	2018	}	
BATH										3145		
2. Municipality	r/Township				-			воок	/PAGE—REG			
3. GRANTEE/ PURCHASER	STROUT 3a) Name (LAST)		CHRISTO	PHER			(MI)	31	o) SSN or Fede	ral ID		
	CAMPBELL 3c) Name (LAST)		ENNIFEI	R			(MI)	30	l) SSN or Fede	ral ID		
	44 UNION ST 3e) Mailing Address	REET										
	BATH 3f) City								ME 3g) State		4530 Zip Code	
4. GRANTOR/ SELLER	BURNHAM 4a) Name (LAST)		NN rst)				(MI)	41	) SSN or Fede	ral ID		
	4c) Name (LAST) 44 UNION ST		RST)				(MI)	40	) SSN or Fede	ral ID		
	4e) Mailing Address											
	BATH 4f) City								ME 4g) St		4530 4h) Zip Cod	de
5. PROPERTY	27 5a) Map	Block	160	Sub-Lot	1 .	describe neck an		ty being <b>so</b> y:	e code numbe I <b>d</b> . (See instruc			
	44 UNION ST	REET				Mu	ltiple parce tion of par	els cel	0.13			
6. TRANSFER TA	(X) 6a) Purchase Pri	ce (If the transfer	is a gift ente				6a	\$183,				.00
		/alue (enter a valu			" in 6a) o	r		\$105,			· .	.00
		nim – Check the	e box if either	grantor or gr	antee is cl	laiming	6b   exemptio	n from tra	nsfer tax and	d explain	l•	.00
05 MONTH	ANSFER (MM-DD-YYYY)  11 2018  DAY YEAR	8. WARNING T front a substa	ntial financial	penalty could	d be trigge	ered by	developm	nent, subd	ivision, parti	tion or c	hange in CLASSII	use. FIED
in the transfer w	UMSTANCES—Were the which suggest that the pri ket value? If yes, check th	ce paid was either n		10.	INCOME,	X	Seller has A waiver	income ta s qualified has been i ation for t	ot required ix because: as a Maine received fror he property	esident n the Sta	nte Tax Ass	sessor
11. OATH	Aware of penalties our knowledge and b Grantee ANN BUR	elief, it is true, corre	ct, and compl Date _0	we hereby sv ete. Grantee(s 5/16/2018 5/16/2018	s) and Gra	ntor(s) CH	it we have or their au RISTOP NNIFER	thorized a	gent(s) are r ROUT	equired Date.	to the be to sign be 05/16/ 05/16/	elow: 2018_
12. PREPARER		CARLY JOYCE			- Cranton		e Number	(207) 76		Date		_
	Mailing Address	970 BAXTER BLV	D SUITE 204				_	carlys@	tlsettlement.	com		
		DODTI AND MED	1/102									

#### **PROCESSED** ONLINE. DO NOT RE-PROCESS.

11. OATH

DLN:	1001	8400	26538
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#### **MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION**

Time Recorded	09:51:00 AM	_
Date Recorded	05/17/2018	
Registry	Sagadanoc	

		! <del></del>							
KE	FTD	TITLE 36, M.R.S.A. SEC	_11ONS §§4641-	4641N	Transfer 7	Tax Amount	\$1,23	2.00	
Sagadaho	С				Docum	ent Number	2018F	R-031:	<u>5</u> 5
1. County						Book	2018		
BATH							3155	****	
2. Municipality	/Township				P.O	Page OK/PAGE—REG		ONLY	
3. GRANTEE/				L	ВО	ON PAGE—REG	IISTRT USE	ONLI	
PURCHASER	JACKSON	BRIAN			L.				
	3a) Name (LAST)	(FIRST)			(MI)	3b) SSN or Fede	ral ID		
	JACKSON 3c) Name (LAST)	AUDREY			L (MI)	3d) SSN or Fede	ral ID		
	5 BROOK ROAD	· · · · · · · · · · · · · · · · · · ·			]	30/ 33N OF Fede	IdiiD		
	3e) Mailing Address				<u>,</u>	_			
	PORTLAND					ME	04	103	
	3f) City					3g) State	3h) Z	ip Code	
4. GRANTOR/ SELLER	WALLACE, JR.	GRANVIL	LE		E.				
	4a) Name (LAST)	(FIRST)			(MI)	4b) SSN or Fede	ral ID		
	4c) Name (LAST)	(FIRST)			(MI) ]	4d) SSN or Fede	ral ID		
	P.O. BOX 95  4e) Mailing Address								
	PHIPPSBURG							5.60	$\neg$
	4f) City					ME 49) St		562 h) Zip Cod	ie
5. PROPERTY				5b) Typ	e of property—Ente				
	38 Bloo	Ck 020	Sub-Lot		s the property being y that apply:	<b>sold</b> . (See instrud	:tions)—»	201	
	,				tax maps exist	0.40		1	
	210 WASHINGTO	JN STREET			Itiple parcels tion of parcel	0.48		}	
6. TRANSFER TA						5d) Acreage			
01 110 11 151 E11 171	6a) Purchase Price (If	the transfer is a gift, ente	,		6a \$28	0,000			.00
	6b) Fair Market Value if 6a) was of nominal	e (enter a value <b>only</b> if you Evalue)	ı entered "0" in 6a	) or	6b				.00
	•	_							
	oc) exemption claim –	Check the box if either	grantor or grantee is	s claiming	exemption from	transfer tax and	ı explain.		
		8. WARNING TO BUYER-If the front a substantial financial						_	
05 L	15 2018 YEAR	none a substantial inialicial p	scharty could be the	agered by	aevelopment, St	iodivision, part		CLASSIF	
	UMSTANCES—Were there any	y special circumstances	10. INCOM	ΛΕ TAX WI	THHELD- Buyer(	s) not required			

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 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: GRANVILLE E. WALLACE, JRe 05/17/2018 Grantor BRIAN L. JACKSON 05/17/2018

05/17/2018 AUDREY L JACKSON 05/17/2018 Grantor Date Date

12. PREPARER VALERIE ARSENAULT Phone Number <u>(603) 427-9399</u> Name of Preparer  $\hbox{E-Mail Address} \quad \underline{ \quad varscnault@reddoortitle.com}$ 676 POST ROAD #3 Mailing Address WELLS, ME 04090 Fax Number

12. PREPARER

Name of Preparer

Mailing Address

DLN: 1001840027364

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

Registry	Sagadahoc
Date Recorded	05/17/2018
ime Recorded	09:53:00 AM
	A04.50

DO NOT	DE DDOCECC			·/\	1	raic ICC	Jiucu _c	13/11/12010	<u> </u>
	RE-PROCESS.		RATION		T	ime Rec	orded (	)9:53:00 A	M
KE	TTD	TITLE 36, M.R.S.A. SEC	_TIONS §§4641-4	4641N	Transfe	r Tax An	nount \$	594.70	
Sagadaho	oc_				Docu	ment Nu	ımber 2	2018r-031′	 70
1. County	-						Book 2		
BATH									
2. Municipality	/Township				,	2004/246	Page 3		
3. GRANTEE/						BOOK/PAG	E—REGIST	TRY USE ONLY	
PURCHASER	REGIONAL SCHO	OOL UNIT NO. 1							
	3a) Name (LAST)	(FIRST)			(MI)	3b) \$\$N	l or Federal I	ID	
	3c) Name (LAST)	(FIRST)	***. ,,,		(MI)	3d) SSN	l or Federal I	ID	
	34 WING FARM I	PARKWAY							
	BATH						ME	04530	
	3f) City						ME g) State	3h) Zip Code	
4. GRANTOR/	WING EARM HO	I DINCE II C						3.1/, <b>3.</b> 1/2	
SELLER	WING FARM HO 4a) Name (LAST)	(FIRST)			(MI)	4b) SSN	l or Federal I	D	
		•			(44.17)				
	4c) Name (LAST)	(FIRST)			(MI)	4d) SSN	l or Federal I	D	
	37 WING FARM I	PARKWAY				,			
	4e) Mailing Address								
	BATH						ME	04530	
	4f) City						4g) State		de
5. PROPERTY	24	4		5b) Type of describes the					
	5a) Map Block		Sub-Lot (	Check any th	at apply:		.c mstraction	101	
	37 WING FARM I	PARKWAY			maps exist le parcels	- 1	.34		
	5c) Physical Location			X Portion	of parcel		creage		
6. TRANSFER TA	X 6a) Purchase Price (If 1	the transfer is a gift, ente	r "0")		6a \$3	38,500			00.
	6b) Fair Market Value	enter a value <b>only</b> if you	entered "0" in 6a)	or					] ]
	if 6a) was of nominal v	value)			6b				.00
	6c) Exemption claim –	$\overline{\mathrm{X}}$ Check the box if either $\mathfrak{g}$	grantor or grantee is	claiming exe	mption fro	m transfer	tax and ex	xplain.	
Grantee is	exempt pursuant to 3	6 MRS Section 46	41-C(1), trans	fer to go	vernme	ntal ent	ity		
7. DATE OF TRA	NSFER (MM-DD-YYYY) 8	B. WARNING TO BUYER-If th	ne property is classifie	ed as Farmia	nd, Open S	pace, Tree	Growth, o	r Working Wate	er-
05 MONTH	16 2018 f	ront a substantial financial p	oenalty could be trig	gered by de	velopment,	subdivisio	n, partitio	n or change in CLASSI	
	UMSTANCES—Were there any	•	10. INCOM	E TAX WITH	•		•	withhold Maine	e
	hich suggest that the price paid ket value? If yes, check the box a			∏Se	nco ller has qua	me tax be alified as a		ident	
				□ A \	waiver has l	oeen recei	ved from t	he State Tax As	
							operty is l	ess than \$50,00	00
11. OATH	Aware of penalties as set	forth by Title 36 §4641-K, v	we hereby swear or a		reclosure S have each		d this return	n and to the h	est of
	our knowledge and belief, it	is true, correct, and comple	ete. Grantee(s) and G	irantor(s) or t	heir author	ized agent	t(s) are req	uired to sign b	elow:
	Grantee WING FARM	HOLDINGS, LJaC 05		or <u>REGI</u>	ONAL S	CHOOL	UNIT N		
	Cranton	D 0'	5/17/2018					05/17/	72018

Phone Number (207) 253-0576

E-Mail Address <u>cpierce@dwmlaw.com</u>

CANDICE PIERCE

PORTLAND, ME 04101

84 MARGINAL WAY, SUITE 600

#### **PROCESSED** ONLINE. DO NOT RE-PROCESS.

DLN: 1001840027565

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

Registry	Sagadahoc
Date Recorded	05/21/2018
Time Recorded	09:46:00 AM
Transfer Tax Amount	\$715.00
Document Number	2018r-03220
Book	2018
ъ.	2220

RE	TTD	TITLE	36, M.R.S.A. SECTION	NS §§4641-46	541N	TT.		•	09:46:0	
Sagadaho	)C							•	\$715.00	
1. County	<del></del>					Do	cument?	Number .	2018r-0	3220
BATH				· 1				Book .	2018	
2. Municipality	//Township							Page	3220	
3. GRANTEE/	// IOW/ISINP						BOOK/F	AGEREGI	STRY USE ON	NLY
PURCHASER	BURKE 3a) Name (LAST)		CULLEN			J				
	SENK 3c) Name (LAST)		JULIE			(MI) M		SSN or Feder		
	16 STACEY	STREET	(FIRST)			(MI)	3d)	SSN or Federa	al ID	
	3e) Mailing Address								¬ —	<del></del>
	BATH							ME	0453	
4. GRANTOR/	3f) City							3g) State	3h) Zip C	lode .
SELLER	MACARTH 4a) Name (LAST)	UR	CHRISTOPHE (FIRST)	R		M (MI)	4b)	SSN or Federa	al ID	
	4c) Name (LAST)		(FIRST)			(MI)	4d):	SSN or Federa	aLID	
	16 STACEY	STREET					. =,			
	4e) Mailing Address	511031								
	BATH							ME	0453	0
	4f) City							4g) Sta		ip Code
5. TRANSFER TA	16 STACEY 5c) Physical Location			b-Lot	Multip	maps ex le parcels of parce	50	0.01		
			sfer is a gift, enter "0") value <b>only</b> if you ente	red "0" in 6a) o	or	6a	\$162,5	00		.00
	if 6a) was of n		• •	·		6b				00.
	6c) Exemption	claim – 🔲 Chec	k the box if either granto	r or grantee is c	laiming ex	emption t	from trans	fer tax and	explain.	
05 MONTH	NNSFER (MM-DD-YYYY) 18 2018 DAY YEAR	front a sul	NG TO BUYER–If the propostantial financial penalt						ion or chang	
n the transfer w	CUMSTANCES—Were t which suggest that the ket value? If yes, check	orice paid was eith	er more or less	10. INCOME	X Se	in eller has c waiver ha	come tax jualified a is been re- ion for the	because: s a Maine re ceived from		x Assessor
1. OATH	Aware of penalti our knowledge and	es as set forth by I belief, it is true, c	Title 36 §4641-K, we her orrect, and complete. Gra	eby swear or aff antee(s) and Gra	firm that wantor(s) or t	e have ea their auth	ich exami iorized ad	ned this ret ent(s) are re	urn and to the	ne best of an below:
			ACARTHIJR05/21/2			EN J B				/21/2018
	Grantee		Date 05/21/2		TT TT TT	E M SEI	ΝK			/21/2018
2. PREPARER	Name of Preparer	JODI MORSE			Phone N	umber	(207) 333-	3626		
	Mailing Address	223 MAIN STR	EET		E-Mail Ad	dress	jodi@trew	orgy-baldao	cci.com	
		AUBURN, ME	04210		Fax Num	ber _				

DLN: 1001840027719

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

Registry	Sagadahoc					
Date Recorded	05/21/2018					
Time Recorded	09:44:00 AM					
nsfer Tax Amount	\$0.00					
N	2019 02276					

	RE-PROCESS. <b>ITD</b>	<b>DECLAI</b> TITLE 36, M.R.S.A. SEC		11.1	Time Re	ecorded _	09:44:00 A	M
		TITLE 30, M.R.S.A. SEC	110113 334041-404	Tran	sfer Tax A	Amount _	\$0.00	
Sagadaho	c			D	ocument N	Number _	2018r-0327	6
1. County						Book	2018	
BATH	-					Page :	3276	
2. Municipality	/Township				BOOK/P/	-	TRY USE ONLY	
3. GRANTEE/ PURCHASER	REGIONAL SCH	OOL UNIT NO. 1 (FIRST)		(MI)	3b) S	SN or Federal	ID	
	34 WING FARM	PARKWAY			, -			
	3e) Mailing Address  BATH  3f) City					ME 3q) State	04530 3h) Zip Code	
4. GRANTOR/ SELLER	CITY OF BATH 4a) Name (LAST)	(FIRST)		(MI)	4b) S	SN or Federal		
	4c) Name (LAST)  55 FRONT STREM 4e) Mailing Address	(FIRST)		(MI)	4d) S	SN or Federal	ID	
	BATH 4f) City					ME	04530 4h) Zip Coo	
5. PROPERTY	24 Sa) Map Block WING FARM PAI Sc) Physical Location		de	o) Type of property escribes the proper ck any that appl No tax maps of Multiple parco Portion of par	ty being <b>sold</b> . y: exist els cel		nat <b>best</b>	
6. TRANSFER TA	X	the transfer is a gift, enter	·"O")	62	\$277,50			.00
		(enter a value <b>only</b> if you		ба	\$277,30			.00
	if 6a) was of nominal	• •	entered o moaj or	6b				.00
Grantor ar	6c) Exemption claim – nd Grantee are exemp	$\overline{X}$ Check the box if either g t pursuant to $36~\mathrm{MR}$						ntities
05 MONTH	21 2018 f	3. WARNING TO BUYER-If the ront a substantial financial p		•			-	use.
n the transfer w	UMSTANCES—Were there any hich suggest that the price paid set value? If yes, check the box	d was either more or less	10. INCOME TA	X Seller has	income tax l s qualified as has been rec ation for the	pecause: a Maine res eived from	withhold Maine sident the State Tax Ass less than \$50,00	essor
11. OATH		forth by Title 36 §4641-K, was is true, correct, and complete H Date 05	te. Grantee(s) and Grant	tor(s) or their au	thorized age	ent(s) are red		low:

Date 05/23/2018 Date 05/23/2018 Grantee. 12. PREPARER Phone Number (207) 253-0576 CANDICE PIERCE Name of Preparer E-Mail Address <u>cpierce@dwmlaw.com</u> 84 MARGINAL WAY, SUITE 600 Mailing Address

Fax Number

PORTLAND, ME 04101

DLN: 1001840027866

Registry	Sagadahoc
Date Recorded	05/23/2018
Time Recorded	01:40:00 PM
sfer Tax Amount	\$787.60

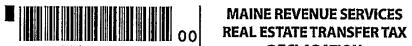
Sagadahoo  1. County  BATH	TTD	1	ARATION	1		Time D	acorded 0	1 · 40 · 00 P	N /I	
1. County		TITLE 36, M.R.S.A. S	TITLE 36, M.R.S.A. SECTIONS §§4641-4641N			Time Recorded 01:40:00 PM Transfer Tax Amount \$787.60				
1. County	C.									
	<u> </u>				Do	cument	Number <u>2</u>	.018r-0331	.0	
LDAID							Book <u>2</u>	018		
2. Municipality/	Township						Page 3	310		
3. GRANTEE/	Township					BOOK/I	PAGE—REGIST	RY USE ONLY		
PURCHASER	CANDLER 3a) Name (LAST)	BRETT (FIRST)			A.	3b)	SSN or Federal II	D		
	CANDLER 3c) Name (LAST)	RUTH (FIRST)			A.	3d)	SSN or Federal II	D		
	270 DURHAM F	ROAD				<b>5</b> ,	55.15, 1656.4.1			
	BRUNSWICK 3f) City						ME 3g) State	04011 3h) Zip Code		
4. GRANTOR/ SELLER	MACLEOD, III	ELDON (FIRST)			(MI)	4b)	SSN or Federal II			
	MACLEOD 4c) Name (LAST)	WILEY (FIRST)			D.	4d)	SSN or Federal II	D		
	P.O. BOX 609									
	4e) Mailing Address							_		
	NEWCASTLE						ME	04553		
	4f) City						4g) State	4h) Zip Co	de	
5. PROPERTY		lock Lot	Sub-Lot	describes t Check any t No ta	he property hat apply x maps ex	/ being <b>sold</b> : <sup>kist</sup> [	code number tha I. (See instruction			
	436-438 WASHI 5c) Physical Location	NGTON STREET		_	ple parce on of parc	<sub>el</sub> L	0.38 d) Acreage			
5. TRANSFER TA	X 6a) Purchase Price (	(If the transfer is a gift, en	iter "0")		6a	\$179,0	000	1 60	.00	
	6h) Eair Markot Valu	ue (enter a value <b>only</b> if y	ou entered "0" in 6a)	or	Ē				J	
	if 6a) was of nomina	ai vaiue)			6b [				.00	
	if 6a) was of nomina	- Check the box if either	er grantor or grantee is	s claiming e		from tran	sfer tax and ex	plain.	.00	
05 MONTH	if 6a) was of nominated by the second of the	Check the box if either  8. WARNING TO BUYER-If front a substantial financial	f the property is classifi	ied as Farm	xemption land, Ope	n Space, T	ree Growth, or	Working Wate	r- use.	
05 MONTH  3. SPECIAL CIRCLE on the transfer will	if 6a) was of nominated by the second of the	Check the box if either      MARNING TO BUYER-If front a substantial financial my special circumstances baid was either more or less	f the property is classifi al penalty could be trig	ggered by d	xemption land, Ope evelopme HHELD – E in Geller has	n Space, Tent, subdiv Buyer(s) no ncome tax qualified a as been re tion for th	ree Growth, or	Working Wate n or change in CLASSI withhold Maine dent ne State Tax As	use. FIED	
MONTH  SPECIAL CIRCLE  the transfer will	if 6a) was of nominated and serious of the suggest that the price part of the suggest that	8. WARNING TO BUYER-If front a substantial financial my special circumstances baid was either more or less box and explain:	f the property is classifi al penalty could be trig 10. INCOM K, we hereby swear or a plete. Grantee(s) and C	ied as Farm ggered by d  IE TAX WITI  X  A  Grantor(s) on	Amption  Jand, Ope evelopme  HHELD—E  Geller has A waiver h  Considera Foreclosur we have e their aut	n Space, Tent, subdiver(s) no noome tax qualified a as been retion for the Sale each exam horized against the sale each example example example each example example each example example each example e	ree Growth, or vision, partition of required to v t because: as a Maine residenceived from the property is leading this ined this returnent(s) are required.	Working Wate n or change in CLASSI withhold Maine dent ne State Tax As: ess than \$50,00 n and to the be uired to sign be	r- use. FIED e sessor 00	
MONTH  SPECIAL CIRCI the transfer wl han its fair mark	if 6a) was of nominated by the second	8. WARNING TO BUYER-If front a substantial financial my special circumstances baid was either more or less box and explain:  set forth by Title 36 §4641-If, it is true, correct, and com CLEOD, III  Date	f the property is classifial penalty could be trigonal for the property of the	ied as Farm ggered by d  IE TAX WITI  X 9  A  affirm that of the control of the c	land, Ope evelopme HHELD – E is Geller has A waiver h Considera Foreclosur we have e their aut TT A. C	n Space, Tent, subdiverses, subdiverses, and come tax qualified a as been retion for the Sale ach examplorized aga.	ree Growth, or vision, partition of required to v because: as a Maine residenceived from the exceived from the property is leading this ined this returnation of the gent(s) are required.	Working Waten or change in CLASSI withhold Mained dent the State Tax Assess than \$50,000 and to the buired to sign be Date 05/23/	r- use. FIED essessor 00	
MONTH SPECIAL CIRC the transfer when its fair mark	if 6a) was of nominated by the second	8. WARNING TO BUYER-If front a substantial financial my special circumstances and was either more or less box and explain:  Seet forth by Title 36 §4641-If, it is true, correct, and compared to the correct of the cor	f the property is classifial penalty could be trigen along the penalty could be trigen and the penalty swear or plete. Grantee(s) and the penalty of the property o	ied as Farm ggered by d  IE TAX WITI  X 9  Graffirm that with the control of the	Amption  Jand, Ope evelopme  JHELD – E  Geller has a waiver h  Considera Foreclosur we have e their aut  TT A. C  H A. C	n Space, Tent, subdiversely no super(s) no noome tax qualified a as been retion for the Sale ach exam horized ag CANDLE	ree Growth, or vision, partition of required to vision and the residence of the property is less a factorized from the property is less and this returnment(s) are required.	Working Wate n or change in CLASSI withhold Maine dent ne State Tax As: ess than \$50,00 n and to the be uired to sign be	r- use. FIED essessor 00 est of elow: '2018	
MONTH  SPECIAL CIRCI  the transfer wl  han its fair mark	if 6a) was of nominated to be seen as a sour knowledge and belie Grantee WILEY D. Mare of Preparer PH.	8. WARNING TO BUYER-If front a substantial financial my special circumstances baid was either more or less box and explain:  set forth by Title 36 §4641-If, it is true, correct, and com CLEOD, III  Date	f the property is classifial penalty could be trigen along the penalty could be trigen and the penalty swear or plete. Grantee(s) and the penalty of the property o	ied as Farm ggered by d  IE TAX WITI  X 9  Graffirm that with the control of the	land, Ope evelopme HHELD-E in Seller has waiver h Considera Foreclosur we have e their aut TT A. C H A. C	n Space, Tent, subdiver(s) no noome tax qualified a as been retion for the Sale each exam horized ag CANDLE	ree Growth, or vision, partition of required to vision and the residence of the property is less a factorized from the property is less and this returnment(s) are required.	Working Waten or change in CLASSI withhold Mained dent ne State Tax Assess than \$50,000 n and to the bouired to sign be Date 05/23/Date 05/23/	r- use. FIED essessor 00	

Merits: 0011851117529 Trips: 7181730080059



.110			MAINE REVEN			1		
		00	REAL ESTATE TO DECLAR		X			
RE	ΓTD	ात:	LE 36, M.R.S.A. SECT	IONS §§4641-4	641N	6124	418 11	MKLOS
1. County	<u> </u>						1800	20/1 M 3327
SAGADA	HOC						7 O K-C Transfer T	av nt
2. Municipality	/Township					] /		7
BATH							2018 - 3.	PORT OF N PROPERTY.
3. GRANTEE/						<u></u>	OK/PAGE—REGISTF —	YY USE ONLY
PURCHASER	TATE, RO	NESS, FIRST, MI BERT						
	3c) Name, LAST or BUSI						<u>, 3</u>	
							<u></u>	
	30) Mailing Address 10 SEEKI	NS DR	EVE		<del></del>			
	3f) City							E 1
	BATH						닠 : !	<u></u>
4. GRANTOR/ SELLER	4a) Name, LAST or BUSI	UREN		<u></u>			[	
	Act Name LAST or BUST	NESS_EIRST_ML					.4	
	<u> </u>						·	
	4e) Mailing Address							
	10 Cha	ffee						41.3 Str. de. de.
	4f) City						4g) State	4h) Zip Code
	· Amows	<u> </u>						107020
5. PROPERTY	Sa) Map	Block	Łot 13	Sub-Lot	5b) T descri	ype of property—Ent besthe property bein	er the code number thang sold. (See instruction	tbest s)→ 201
	19					any that apply: Vo tax maps exist	Sd) Acreage	\ <u></u>
	5c) Physical Location					vio tax maps exist.	Jajnacige	
	10 SEEKIN	S DRI	VE			ortion of parcel		•
6.TRANSFERT	6a) Purchase	Price (If the I	transfer is a gift, enter	"O")		ба		.00.
	6b) Fair Marke if 6a) was of n	etValue (ent	er a value <b>only</b> if you e	entered "0" in 6a)	or	6b	1	64000 <b>.00</b>
	=		-, Check the box if either gr	antor or graptee is	ciaimi	na exemption fror	n transfer tax and ex	plain.
				dittor or growted to				
CARROLL OF THE PARTY OF THE PAR	m spouses pursu		oxce ARNING TO BUYER-If the	nronomi is classifi	od ac i	amland Open St	ace. Tree Growth, or	Working Water-
7.DAIE DE 181	ANSFER (MM-DD-YYY 7-2018	front	a substantial financial pe	enalty could be trig	gered	by development,	subdivision, partition	or change in use.
MONTH	DAY YEAR			TO INCOM	ETAV	WITHUEL C. Bone	r(s) not required to v	
in the transfer v	CUMSTANCES—Were to which suggest that the	price paid wa	s either more or less 🖰	10.11120111	 T	incor	ne tax because:	
than its fair man	ket value? If yes, check	the box and	explain:		Į		lified as a Maine resi een received from ti	ne State Tax Assessor
	•				Ĭ		for the property is l	
	/\					Foreclosure Sa		
11. OATH	Aware of penalt	ies as set fort	h by Title 36 \$4641-K, w ue, correct, and complet	e hereby swear or a	affirm ' irantor	that we have each (s) or their authori	examined this retur zed agent(s) are req	n and to the best of uired to sign below:
	Grantee		Date 5	1818 Grant	_	Lawer 23	<b>200</b>	Date 5/21/18
	Grantee.		Date	Grant	or			Date
12. PREPARER	Name of Preparer	Moncure & Bar	micle			one Number 207-7	29-0856 il@mb-law.com	
=	Mailing Address	PO Box 636	, ME 04011	······································		Mail Address	Sine mineralli	
			ww.maine.gov/revenue.	/oropertytax/trans	•	x Number /transfertax.htm		

Merits: 0011851118121 Trips: 7181730080043



*1.2RETTD* DECLARATION RETTD TITLE 36, M.R.S.A. SECTIONS §\$4641-4641N				11N	<b>/</b> 05/24/2018 02:28 PM≤					
1. County					2018 —	1				
SAGADA	HOC				Transfer Tax					
2. Municipality	/Township	<del></del>	*** - ***		State of Maine ' SAGADAHOC CO					
BATH		<del></del>	······································							
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINES KERR PROP	s.first.mi ERTIES LLC		ما المادية الم	BOOK/PAGE—REGIST	TRY USE ONLY	—- <b></b>			
	3c) Name, LAST or BUSINES	S. EIRST. MI		A. M. S. (1970)	<b>-</b> 1					
	3el Malling Address 33 TYNG ST	FREET, #3				sn) zip code				
	PORTLAND				ME	04102				
4. GRANTOR/ SELLER	PURSUIT E	NTERPRISES, LLC			]		ī			
	4e) Mailing Address 130 CENTR	STREET	;		J	l				
	BATH				4g) State ME	4h) Zip Code 04530				
5. PROPERTY	5a) Map  27  5c) Physical Location	Block Lot St	2] d	b) Type of propert escribes the proper eck any that app No tax maps	•	at best 502				
	130 CENTRE	STREET		Multiple pard Portion of par	1	0.51				
6. TRANSFER TA	AX 6a) Purchase Prio	e (If the transfer is a gift, enter "0")		-3 6a	1	65000	.00			
	6b) Fair Market V if 6a) was of nom	alue (enter a value <b>only</b> if you ente iinal value)	ered "0" in 6a) or	6b	****		.00			
	6c) Exemption cla	m – Check the box if either grant	or or grantee is cla	iming exemptio	n from transfer tax and e	xplain.				
05 MONTH	ANSFER (MM-DD-YYYY)  Z/ /8  DAY YEAR	8. WARNING TO BUYER-If the profront a substantial financial penal	ty could be trigge	red by developn	nent, subdivision, partitio	on or change in us CLASSIFI	e.			
in the transfer v		e any special circumstances te paid was either more or less to box and explain:	10. INCOMET	ر <i>سے</i>	Buyer(s) not required to income tax because: s qualified as a Maine resi					
				A waiver	has been received from tration for the property is l	he State Tax Asse				
11.OATH	Aware of penalties our knowledge and be	as set forth by Title 36 54641-K, we he elief, it is true, correct, and complete. G Lyfamul Date 5/24	rantee(s) and Gran	rm that we have ator(s) or their at	each examined this return the required agent(s) are required agent(s) are required agent (s) are required agent (s	rn and to the bes uired to sign belo Date	t of ow: 2019			
12. PREPARER	Grantee	Date	Grantor		227 225 2425	Date	<del></del>			
14.FREFAREK	Name of Pieparet	vers & French, P.A. 9 Main Street		Phone Number	207-865-3135 karen@powersandfrenc	h.com				
	Mailing Address —	eeport, ME 04032		E-Mail Address Fax Number	207-865-0459	······································				

Merits: 0011851117023 Trips: 7181730080047



**RETTD** 

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

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

#### PLEASE TYPE OR PRINT CLEARLY

DO NOT USE RED INK!

1. COUNTY	DO NOT USE R	ED INK!	State of Maine Transfer Tax
SAGA	AHOL		SAGADAHOC COUNTY MAINE
2. MUNICIPALIT	Y/TOWNSHIP		(2018 <u>3368</u> )
BATH			BOOK/PAGE—REGISTRY USE ONLY
3. GRANTEE/	3a) Name (LAST, FIRST, MI)	······································	<u> </u>
PURCHASER	OSINSKI JULIE VI 3C) Name (CAST, FIRST, MI)		-
	3e) Mailing Address 110 H16H ST 3f) City BATH	31.00	3g) State 3h) Zip Code M E 0 4 5 3 0
	4a) Name (LAST, FIRST, MI)		ME 0 13 201
4. GRANTOR/ SELLER	BURK WILLIAM H DR		-
			_
:	4e) Mailing Address 2655 NE 8 <sup>th</sup> AVE #204		
	WILTON MANORS		4g) State 4h) Zip Code FL 3 3 3 3 4
5. PROPERTY	5a) Map Block Lot Su	b-Lot Check any that a	number that best describes the property being sold. (See instructions)
	5c) Physical Location  110 H16H STREET	Multiple p	arcels 5d) Acreage:
6.TRANSFER		7, 10, 13, 17	
TAX	6a) Purchase Price (If the transfer is a gift, enter "0")	ба	0.00
	6b) Fair Market Value (enter a value <b>only</b> if you entered if 6a) was of nominal value)	f"0" in 6a) or 6b	00
	6c) Exemption claim – _ Check the box if either grantor or	r grantee is claiming exemption fr	om transfer tax and explain.
<b>i</b>	PURSUANT TO DIVORCE		
	AA AI 2016 Tree		ty is classified as Farmland, Open Space or enalty could be triggered by development, e. ——.
	MONTH DAY YEAR		
9. SPECIAL CIRC which suggest the If yes, check the	JMSTANCES—Were there any special circumstances in the trans at the price paid was either more or less than its fair market value oox and explain:	ue?	IHHELD— Buyer(s) not required to withhold Maine income tax because: s qualified as a Maine resident
			has been received from the State Tax Assessor
		Conside	ration for the property is less than \$50,000
11.OATH	Aware of penalties as set forth by Title 36 §4641-K, we her our knowlestre and belief, sistrue, correct, and complete, Grantee	antee(s) and Grantor(s) or their at	each examined this return and to the best of thorized agent(s) are required to sign below: Date
	Grantee Date	1 -	Date
12. PREPARER	Name of Preparer		
	Mailing Address	E-Mail Address	

#### PROCESSED ONLINE. DO NOT RE-PROCESS.

4a) Name (LAST)

4c) Name (LAST)

4e) Mailing Address

5c) Physical Location

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

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

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

25

DAY

Grantee

3f) City

3a) Name (LAST)

3c) Name (LAST)

RETTD

Sagadahoc 1. County **BATH** 

3. GRANTEE/ **PURCHASER** 

4. GRANTOR/

5. PROPERTY

6. TRANSFER TAX

05

11. OATH

12. PREPARER

MONTH

**SELLER** 

2. Municipality/Township

DLN: 1001840028099

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

ESSED	DLN: 1001840028099	_					
LINE.	MAINE REVENUE SERVICE	ES	_		Registry	Sagadahoc	
E-PROCESS.	REAL ESTATE TRANSFER TA	AX		Date F	Recorded	05/25/2018	3
	DECLARATION			Time F	Recorded	12:54:00 P	M
<u>TD</u>	TITLE 36, M.R.S.A. SECTIONS §§4641-	4641N	Tran	isfer Tax	Amount	\$787.60	
			D	ocument	Number	2018r-033	72
						2018	·
						3372	
wnship				BOOK/	•	ISTRY USE ONLY	<u> </u>
BOWDEN (a) Name (LAST)	ERIC (FIRST)	ı	C (MI)	3b)	) SSN or Fede	ral ID	
BOWDEN c) Name (LAST)	AMANDA (FIRST)		A (MI)	3d)	SSN or Fede	ral ID	
765 COLLEGE S	TREET		]	54,	, 5577 01 1 2 4 2 1		
e) Mailing Address						¬	
LEWISTON f) City					ME	04240	,
MUZAURIETA a) Name (LAST)	JOSE (FIRST)		<b>Н</b> (МІ)	4b)	3g) State	3h) Zip Code ral ID	
c) Name (LAST)	(FIRST)		(MI)	4d)	SSN or Feder	ral ID	
1121 CRANDON	BLVD. APT#D501						
e) Mailing Address							
KEY BISCAYNE	,				FL	33149	
f) City		5h) Tvn	e of property	Enter the	4g) Sta		de
O1 Bloom	ck 023 Sub-Lot	describe Check an	es the proper y that appl	ty being <b>sol</b> e <b>y</b> :	<b>d</b> . (See instruc		
43 WEST CHOPS c) Physical Location	POINT ROAD	☐ Mu	tax maps of ultiple parco tion of par	els cel	3.10		
· · · · · · · · · · · · · · · · · · ·	the transfer is a gift, enter "0")	<del></del>	ба	\$179,0			.00
	e (enter a value <b>only</b> if you entered "0" in 6a)	\ or	Oa	φ1/2,0			] .00
if 6a) was of nominal		, 0.	6b				.00
6c) Exemption claim –	Check the box if either grantor or grantee is	s claiming	j exemptio	n from tran	sfer tax and	l explain.	
5 2018 YEAR	8. WARNING TO BUYER-If the property is classif front a substantial financial penalty could be tried	ggered by	/ developm	nent, subdi	vision, parti	tion or change in CLASSI	use. FIED
ISTANCES—Were there any h suggest that the price pa value? If yes, check the box	id was either more or less	TE TAX W	Seller has A waiver	income tax s qualified a has been re ation for th	x because: as a Maine r eceived fror	to withhold Main esident n the State Tax As is less than \$50,00	sessor
our knowledge and belief,	et forth by Title 36 §4641-K, we hereby swear or it is true, correct, and complete. Grantee(s) and C	Grantor(s)	or their au	thorized a	nined this re gent(s) are r	equired to sign b	elow:
rantee <u>JOSE H MUZ.</u>	05/20/2019		IC C BO IANDA		DEN	Date 05/29	/2018 /2018
rantee	Date 03/29/2018 Grant ES HOPKINSON		e Number.			Date	2010
	TY CENTER SUITE 400		e Number. il Address		on@hablaw.	.com	

6 CITY CENTER SUITE 400 Mailing Address PORTLAND, ME 04101

l1851117225 Trips: 7181730080051

			Merits	: 0011851
_	00 L2RETTD*	MAINE REVEN REAL ESTATE T DECLAR	RANSFER TAX RATION	
7. County	TTD	TITLE 36, M.R.S.A. SECT	TIONS §§4641-464	1N
SAGADA	нос	_		
2. Municipality				
BATH				7
PURCHASER  4. GRANTOR/	Aa) Name LAST or BUSINESS, FIRS MURRAY, MICH ach Name LAST or BUSINESS, FIRS NELSON, BOND Act Mailing Address.  [2 SCHOONER Fancing BATH  4a) Name LAST or BUSINESS, FIRS	VIE R. RIDGE #13		
4. GRANTOK SELLER	HALL, JOHN E  4c) Name, LAST or RUSINESS. FIRS  JOHNSON HALI  4e) Mailing Address	E. MARGARET	C.	
	83 CUTTING F 41)Cly PHIPPSBURG	ROAD		
5. PROPERTY	5a) Map Bloci	Lot OZ3		Type of property- scribes the property ik any that apply:

DRIVE

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

5c) Physical Location

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

DAY

05-25-2018

6. TRANSFER TAX

11. OATH

12. PREPARER

MILL POND

YEAR

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

Name of Preparer

Mailing Address

9. SPECIAL CIRCUMSTANCES—Were there any special circumstances in the transfer which suggest that the price paid was either more or less

5 ms

David A. King

108 Front Street, Bath, ME 04530

if 6a) was of nominal value)

05/25/2018 02:51 PM Transfer Tax of 1,386.00 State of Maine Transfer Tax SAGADAHOC COUNTY MAINE BOOK/PAGE---REGISTRY USE ONLY 04530 4gl State 4h) Zip Code ME 04562 property—Enter the code number that best property being sold. (See Instructions)—> No tax maps exist 5d) Acreage Multiple parcels Portion of parcel 315000.00 .00 6c) Exemption claim - Theck 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 Waterfront 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 Maine income tax because: Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 Foreclosure Sale 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 Granter(s) or their authorized agent(s) are required to sign below; **ぴ/みく**/

ба

бþ

207-442-7971

207-442-7910

lawoffice\_daveaking@comcast.net

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

Grantor

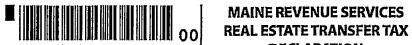
Grantor

Phone Number

E-Mail Address

Fax Number

Merits: 0011851117431 Trips: 7181730080063



*j	L2RETTD*		DECLA	RATION							
RE	<b>RETTD</b> 36 M.R.S. §§ 4641-4641N					- 5 FIR 10.22 A					
1. County						2010	0 10	OO AM			
SAGADAH	loc					ADIA	<u> </u>	340"/			
2. Municipality	/Township					State :	<del>Transfer Ta</del> of Maine Tra	X of Cov			
BATH						SAGADA	THOC CON	NTY MAINE			
3. GRANTEE/			····			BOOK	PAGE—REGISTR	Y USE ONLY			
PURCHASER	3a) Name LAST or BUSINE	SS, FIRST, MI						··			
	WODTKE VON,										
	WODTKE VON				- ·						
	3e) Mailing Address after	purchase of this property	<u> </u>								
	306 APPLETRE	E DR. NE	<u> </u>				sgj State	Sn) Zir Loae			
	LEESBURG		-	-	-		VA	20176			
4. GRANTOR/	4a) Name, LAST or BUSINI	SS, FIRST, MI									
SELLER	TRUSTEE WOL										
	4c) Name, LAST or BUSINE TRUSTEE WOL										
		JINE VOIN, SAC	GOELINE								
	4e) Mailing Address										
	306 APPLETRE					-	 4g) State	4h) ZIP Code			
	4f) City LEESBURG						VA	20176			
							-				
5, PROPERTY	5a) Map	Block	Lot	Sub-Lot		of property—Enter the the property being sol					
	25	85				rthat apply: tax maps exist = 5	-n A				
	Sc) Physical Location	- ··		~ · · · · · · · · · · · · · · · · · · ·		tiple parcels	id) Acreage				
	138 BEDFORD	STREET, BATH	I, MAINE (	04530 		ion of parcel		•			
6. TRANSFER TA	X 6a) Purchase Pr	ice (If the transfer is	a gift, ente	r"0")		6a	\$0	.00			
	бb) Fair Market` if ба) was of no	Value (enter a value	e <b>only</b> if you	entered "0" in	ба) от	6b		.00.			
	-	aim - X Check the	how if aithor	rantor or granto	o ic claiming		acforted and over				
SEMPS	المارية بالمارية (4) كا § 4641-C			·			-				
	<u> </u>										
ر است	NSFER (MM-DD-YYYY)					nland, Open Space, <sup>-</sup> development, subdi					
MONTH MOM	LU DAY YEAR						····	CLASSIFIED			
	UMSTANCES—Were the hich suggest that the pr				OME TAX WI	THHELD Buyer(s) n Income ta	ot required to wi x because:	thhold Maine			
	ket value? If yes, check th		~- ~ -		<del>-</del>	Seller has qualified		ent			
GRANTOR	R / GRANTEE REM	AIN SAME - TR	ANSFER	INTO		A walver has been r					
GRANTOR	S TRUST				Х	Consideration for the Foreclosure sale	ne property is les	is than \$50,000			
11.OATH	Aware of penalties	as set forth by 36 M	R S 6 4641-1	we hereby swe	ar or affirm t		amined this retu	zn and to the best of			
		elief, it is true, correct	t <del>, and</del> comple	te. Grantee(s) an		or their authorized a	gent(s) are requi	red to sign below:_			
	Grantee Land	trub WM	Till -	-/ /	antor		Collete C				
12. PREPARER	Grantee Juliane	MANSOOR LAW FIRM	Date S	// 0//8 Gr	antor Special	que un la va		ate <u>6 // (2// )</u>			
I ST INCHIER	Name of Preparer	14084 RIVERSIDE PARKW	YAY 120		•	Number 703 Address	1404-7733				
	Mailing Address	LEESBURG, VA 20176				nuper					

Rev. 12/15

Merits: 0011851118635 Trips: 7181730080071



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

#### PLEASE TYPE OR PRINT CLEARLY

*^5	99900*	00	DEC	E TRANSFER T		5	10	1912018	1:45P	M
	TTD			. SECTIONS 4641-		<u>!</u> ,	20	)/8 R-	03428	,00
			PLEASE TYPE (		RLY	_		Hallpit	# Ida Ui	
1.COUNTY SAGADAI	HOC		DO NOT	USE RED INK!			SAG	ADAHOÇ (	e Transfer Tax COUNTY MAIN	E
2. MUNICIPALI BATH	TY/TOWNSHIP						ВООР	・スロしる PAGE—REGISTI	— 3428 ) RYUSE ONLY	)
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST	i, s	TEVEN			- <u> </u>	-			
	JACUNSKI		AUĻA Ķ.	_1_1_1_1_1_1_1_1_	11	· · · · · · · · · · · · · · · · · · ·	_			
	3e) Mailing Address 4 RANGEF 3f) City BATH	Ŗ, ÇI,	RÇĻE	1 1 1 1 1 1 1	<del></del> .			3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	4a) Name (LAST, FIRS JACUNSK)		TEVEN			<u> </u>	<u>,</u>	, <u>ME</u>	04530	
	4c) Name (LAST, FIRST	, MI)			<u></u>		-			
	4e) Mailing Address 4 RANGEF	ÇĮ	RCLE,,,,						ı	
	BATH							4g) State ME	4h) Zip Code 04530	
5. PROPERTY	5a) Map 24 -	Bloc	- Lot 01	O - Sub-Lot	Che	ck any that apply	y. 		erty—Enter the code describes the property structions)	
	5c) Physical Location 4 RANGER	CI	RCLE		, <u> </u>	Multiple parce	els	5d) Acreage:		
6.TRANSFER TAX	6a) Purchase Prio	e (If the	transfer is a gift, enter	"O")		6a \$		-4 91 1 1 1	,, , , 0, .00	
	6b) Fair Market V if 6a) was of nom		iter a value only if you ue)	entered "0" in 6a) or	,	бb \$		_,_29	2600. <b>00</b>	
		-	Check the box if either g				transf	er tax and explai	n.	
	need from nust	and to	o husband and wife	s without actual	CORS:	ideration.				:
	7. DATE OF TRANSF			8. WARNING TO Tree Growth, a St subdivision, part	ubstanti	ial financial pena		uld be triggered	d, Open Space or by development,	
	MONTH DAY		YEAR				<u></u>	CLASSIFIED		
	at the price paid was		r special circumstances in nore or less than its fair ma		IO. INC			Buyer(s) not red Maine income I as a Maine resid		
					ļ				ne State Tax Assessor	
						Consideratio	on for t	the property is le	ess than \$50,000	
11.OATH	our knowledge and	gelief, i	t forth by Title 36 §4641- it is true, corrects and com	plete, Grantee(s) and	Grantor	(s) or their author		agent(s) are requ	ired to sign below:	
:	Grantee Taule	<del>/ USE -</del>	ansh Date	Children Cian		<u>~ / ~~~</u>		·*	Date <u>\$   26   20   Y</u> Date	"
12. PREPARER		John	W.Voorhees, E.	' ,		one Number	207-	443-1333		1
	Mailing Address	839 1	Washington Str , ME 04530	-	-		johr	@voorhees	slaw.com	

DLN: 1001840028272

Registry	Sagadahoc
Date Recorded	05/29/2018
Time Recorded	02:40:00 PM
Transfer Tax Amount	\$1,144.00
Document Number	2018r-03430
Book	2018
	2.420

	RE-PROCES	55.	DECLAR	RATION		ľ	Time	Recorded	02:40:00	PM
<u>RE</u>	TTD	TITLE	36, M.R.S.A. SECT	TIONS §§4641-4	641N	Tro			\$1,144.00	
Sagadaho	oc									
1. County						, P	ocumen		2018r-03	430
BATH								Book	2018	
2. Municipality	y/Township							Page	3430	
3. GRANTEE/							BOOK	/Page—reg	ISTRY USE ONL	Y
PURCHASER	DOWE		SUSAN			т.				
	3a) Name (LAST)		(FIRST)			E (MI)	31	) SSN or Feder	ral ID	
	3c) Name (LAST)		(FIRST)			(MI)	30	l) SSN or Feder	al ID	
	3 LINDEN S	STREET								
	3e) Mailing Address								<del>-</del>	
	BATH						j	ME	04530	)
4. GRANTOR/	3f) City							3g) State	3h) Zip Co	de
SELLER	PERTEL		JOHN							
	4a) Name (LAST)		(FIRST)			(MI)	41	) SSN or Feder	al ID	
							L			
	4c) Name (LAST)		(FIRST)			(MI)	40	) SSN or Feder	al ID	
	3 LINDEN S	STREET								
	4e) Mailing Address								7	
	BATH 4f) City					· · · · · ·		ME	04530	
5. PROPERTY					5b) Tvi	oe of propert	/—Enter th	4g) Sta code number	<u>_</u>	Code
	26		216		describ		ty being <b>so</b>	l <b>d</b> . (See instruc		2
	5a) Map	Block	Lot	Sub-Lot	_	tax maps	•			
	3 LINDEN S	STREET				ultiple parc rtion of par		0.08		
C TRANSFERT	5c) Physical Location				<u> </u>	Tilon or par	CCI	5d) Acreage		
6. TRANSFER TA	6a) Purchase	Price (If the trans	fer is a gift, enter '	′0″)		6a	\$260,	000		.00
			value <b>only</b> if you e	entered "0" in 6a) o	or					$\exists$
	if 6a) was of n	ominal value)				6b				00
	6c) Exemption	claim – Chec	k the box if either gr	antor or grantee is o	claimin	g exemptio	n from tra	nsfer tax and	explain.	
7. DATE OF TRA	ANSFER (MM-DD-YYY		NG TO BUYER-If the	property is classifie	ed as Fa	rmland, Op	en Space,	Tree Growth,	or Working Wa	iter-
05	29 2018	front a sul	ostantial financial pe	enalty could be trigg	gered b	y developm	ent, subd	ivision, partit		
MONTH CIPC	DAY YEAR CUMSTANCES—Were t	hara any spasial si		10 INCOME	TAVW	TOTAL DELICA	D ()			SIFIED
in the transfer w	vhich suggest that the	price paid was eith	er more or less	TO. INCOME	: IAX W			ot required t x because:	o withhold Ma	ine
than its fair mar	ket value? If yes, check	the box and expla	in:		Σ	_		as a Maine re		
					F	**			n the State Tax . s less than \$50	
						Foreclosu		ic property i	5 1655 triair \$50	,000
11. OATH	Aware of penalti	es as set forth by	Title 36 §4641-K, we	hereby swear or a	ffirm th	at we have	each exar	nined this ret	turn and to the	best of
	Grantee JOHN F	a bellet, it is true, c PERTEL	orrect, and complete Date 05/			or their au ISAN E I		gent(s) are re	equired to sign Date05/2	
	Grantee			29/2018 Granto Granto		~111 L	, U II L	<del></del>	Date05/2 Date05/2	
12. PREPARER	Name of Preparer	JAMES HOPKI	Bute	Granto		e Number	(207) 77	2-5845	_ Date	
	Mailing Address	6 CITY CENTE				il Address		on@hablaw.	com	
	-	PORTLAND, M	1E 04101			lumber				

DLN: 1001840027873

Registry	Sagadahoc
-	
Date Recorded	05/30/2018
Time Recorded	10:50:00 AM
Transfer Tax Amount	\$1,584.00
Document Number	2018R-03432
Book	2018
Page	3432

DO NOT	DE DDOCESS	REAL ESTATE TITAL		D	ale Recorded <u>03/30/2</u>	.018
DO NOT RE-PROCESS.  RETTD		DECLARAT		Tir	me Recorded 10:50:0	00 AM
		TITLE 36, M.R.S.A. SECTION	15 994641-4641N	Transfer	00	
Sagadaho	oc			Docum	nent Number 2018R-	03432
1. County				-	Book 2018	
BATH					Page 3432	
2. Municipality	r/Township			В	OOK/PAGE—REGISTRY USE O	NLY
3. GRANTEE/ PURCHASER	MACDONALD II 3a) Name (LAST)  MACDONALD 3c) Name (LAST)	I SCOTT (FIRST)  JENNIFER (FIRST)		D (MI) R (MI)	3b) SSN or Federal ID  3d) SSN or Federal ID	
	6 CEDAR LANE 3e) Mailing Address					
	BATH 3f) City				ME 0453 3g) State 3h) Zip	
4. GRANTOR/ SELLER	MARTIN 4a) Name (LAST)	JIMMY (FIRST)		H (MI)	4b) SSN or Federal ID	
	MARTIN 4c) Name (LAST)	JANICE (FIRST)		W (MI)	4d) SSN or Federal ID	
	274 MEADOW C	ROSS ROAD				
	4e) Mailing Address					
	TOPSHAM  4f) City				ME 0408	86 Zip Code
5. PROPERTY					ter the code number that <b>best</b>	
	16 5a) Map Bloo	ck Lot Sul	o-Lot Check a	iny that apply:	ng <b>sold</b> . (See instructions)—»	202
	6 CEDAR LANE 5c) Physical Location			lo tax maps exist fultiple parcels ortion of parcel	1.40 5d) Acreage	
6. TRANSFER TA	AX	f the transfer is a gift, enter "0")		6a \$3	60,000	.00
		e (enter a value <b>only</b> if you ente	red "0" in 6a) or	00   \$5		
	if 6a) was of nominal		rea o moa, or	6b		.00
	6c) Exemption claim –	Check the box if either granto	r or grantee is claimir	ng exemption fror	n transfer tax and explain.	
05 MONTH	24 2018 DAY YEAR	8. WARNING TO BUYER-If the prof front a substantial financial penalt	y could be triggered l	by development, s	subdivision, partition or chan-	ge in use. _ASSIFIED
in the transfer w	CUMSTANCES—Were there any which suggest that the price pa ket value? If yes, check the box	id was either more or less	_	incor $\overline{X}$ Seller has qual A waiver has b	r(s) not required to withhold in tax because: lified as a Maine resident een received from the State T for the property is less than \$ lie	Tax Assessor
11. OATH			antee(s) and Grantor( $2018$ Grantor $\underline{S}$	s) or their authorize ${\sf COTT\ D\ MAC}$	zed agent(s) are required to s CDONALD II03	
12. PREPARER	Giuntee	LY JOYCE	Grancer	ne Number <u>(20</u>		
		BAXTER BLVD SUITE 204			lys@tlsettlement.com	
	_	TLAND, ME 04103		Number		

DLN: 1001840028047

Registry	Sagadahoc
Date Recorded	05/30/2018
Time Recorded	11:19:00 AM
Transfer Tax Amount	\$770.00
Document Number	2018r-03436
Book	2018
Page	3436
2004/2165 255	

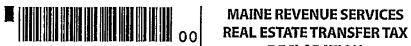
	RE-PROCESS.	DECLA	RATION	1	Time Recorded	11·19·00 A	м
RE'	TTD	TITLE 36, M.R.S.A. SEC	CTIONS §§4641-4	641N Tro	nsfer Tax Amount		
Sagadaho	OC .						
1. County					ocument Number		<u> </u>
BATH		· · · · · · · · · · · · · · · · · · ·			Book	2018	
2. Municipality	/Township				Page	3436	
3. GRANTEE/	·				BOOK/PAGE—REG	ISTRY USE ONLY	
PURCHASER	ESLINGER 3a) Name (LAST)	FRANZ		W (MI)		ral ID	
	ESLINGER 3c) Name (LAST)	JANE		N.			
	1295 HIGH ST			(IVII)	3d) SSN or Feder	ral ID	
	BATH 3f) City				ME 3g) State	04530 3h) Zip Code	
4. GRANTOR/ SELLER	PRAGER 4a) Name (LAST)	KEVIN (FIRST)		L.			
	4c) Name (LAST) 1295 HIGH ST	(FIRST)		(MI)	4d) SSN or Feder	ral ID	
	4e) Mailing Address						
	BATH 4f) City				ME 4q) St	04530 ate 4h) Zip Co	ode
5. PROPERTY	20 Sa) Map  1295 HIGH ST  5c) Physical Location	Block 111 REET	Sub-Lot C		exist els 0.60		
6. TRANSFER TA	X		#2.10		5d) Acreage		1 00
		e (If the transfer is a gift, ente Ilue (enter a value <b>only</b> if you		6a or	\$175,000		00.
	if 6a) was of nomi			6b			00.
7. DATE OF TRA	6c) Exemption clair	n – Check the box if either  8. WARNING TO BUYER-If the					DK-
05 MONTH	25 2018 DAY YEAR	front a substantial financial			•		use.
in the transfer w	CUMSTANCES—Were there which suggest that the price ket value? If yes, check the	paid was either more or less	10. INCOMI	X Seller ha	Buyer(s) not required income tax because: s qualified as a Maine r has been received fror ration for the property ure Sale	resident m the State Tax As	ssessor
11. OATH	Aware of penalties a our knowledge and bel Grantee KEVIN L. I		ete. Grantee(s) and G	rantor(s) or their au	ithorized agent(s) are r ESLINGER	eturn and to the brequired to sign be Date 05/30/	elow: /2018
12. PREPARER		AY AREA TITLE SERVICES .	Granto		(207) 775-5900	Date	
		711 CONGRESS STREET			titles@bayareatitle.co	om	
	-	ORTLAND, ME 04102		Fay Number			

Merits: 0011851109301 Trips: 7181730070003



	12RETTD*			DECLA	RATION						
	TTD		TITLE 36, M.R.S.A. SECTIONS §§4641-4641N			IJ	05/31/2018 09:47 A				
1. County				•			]		2018R-		
SAGADA	HOC								Transfer Ta	x of 2.20	
2. Municipality	y/Township						1	_	State of Maine.		
BATH	,								2018-	3447	<u> </u>
3. GRANTEE/					·	<del></del>	7	BOI	OK/PAGE—REGIST	RY USE ONLY	
PURCHASER	3a) Name LAST or BUS OPEN WII	SINESS, FIRS VDOW	г <u>м</u> г PRO	PERTIĒS.	LLC		<u> </u>	<u> </u>			
	3c) Name LAST or BUS							_' 			
	3el Malling Address 254 CENTRE STREET										
	3f) City		4 4 444						agi práre	_anı 4 <u>ib çoğ</u> e	<u> </u>
	BATH								ME	04530	1
4. GRANTOR/ SELLER	4a) Name, LAST or BUS			ESTATE	ASSOC	ATION					
	,4c) Name, LAST or BUS	INESS, EIRS	C.MI								
								] [			
	4e) Mailing Address			-							
	254 CENT	RE S	TRE	et							
	4f) City							_	4g) State	4h) Zip Co	ode
	BATH								ME	04530	) !
5. PROPERTY	5a) Map	Block		Lot	Sub-Lot	5b) Ty	pe of property	/—Enter	the code number tha	t best 100	
	27	ſ		116	-		bes the proper iny that apply		sold. (See instruction	it best   30	<u> </u>
	Sc) Physical Location	<u> </u>		'	- '	*****	o tax maps e	•	5d) Acreage		
	96 FRONT	STRE	PT.				luitiple parce	- 1			i
		<u> </u>					ortion of pare	cel		• ————————————————————————————————————	<u> </u>
6. TRANSFER TA	XX ба) Purchase	Price (If t	he trans	fer is a gift, enter	<b>"0"</b> )		ба			(	<b>00.</b> (
				value only if you	entered "0" ir	1 6a) or	3			<u> Ε Λ /</u>	
	if 6a) was of r	ominal v	alue) 				6b			500	00.
	6c) Exemption	claim -	Chec	k the box if either g	rantor or grant	tee is claimin	g exemption	from t	ransfer tax and ex	plain.	
	NSFER_(MM-DD-YYY			NG TO BUYER-If the							
	-2018	îr	ont a sui	ostantial financiai po	enalty could b	e triggered t	oy developm	ent, sut	odivision, partition	or change in CLASSI	
MONTH 9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were	there any	necial ci	raimstances	10. IN	COMETAXV	VITHHELD-1	Ruverís	) not required to w		
in the transfer w	which suggest that the	price paid	was eith	er more or less		-	_ (	income	tax because:		_
than its fair mar	ket value? If yes, check	the box a	nd expla	in:		;			ed as a Maine resid		
Ro	of easement bet	ween ne	ghbor	ing parcels.		٠,			n received from th r the property is le		
						اً ا	Foreclosu		(0.00000000000000000000000000000		
11. OATH				Title 36 §4641-K, w							
	17000	d beliefilt	strue, c	frect, and complet	1211112	<i>(</i> ).	s) or their aut	thorized	No el ana	400	elow:
	Grantee Grantee			Date		irantor <u>(2</u> irantor —	NAGALI	Jag	-44-	DateDate	ـــــ
12. PREPARER	Name of Preparer	WEISS DE	RICE PA	vate			ne Number <sup>2</sup>	0744200			
	Mailing Address	P.O. Box	662					ad@leg	acy-llc.com		
	maning nooness	Bath, M	aine 04	1530				207442	0003		
		httn:/	/www.m	aine.gov/revenue/	/nronertytay/i		-	ntm			

Merits: 0011851119243 Trips: 7181730080087



*	12RETTD*		DECLAF	RATION			
RE'	TTD	TITL	E 36, M.R.S.A. SECT	TIONS 5§4641-4	641N		
1. County		1		<del></del>			18 09:47 AM 1-03448
SAGADA	HOC					· · · · · · · · · · · · · · · · · · ·	Tax of 2.20
2. Municipality	/Township			*	<del></del>		ne Transfer Tax
BATH						SAGADAHOO	COUNTY MAINE
<u></u>							
3. GRANTEE/ PURCHASER					<u> </u>	BOOK/PAGE—REG	SISTRY USE ONLY
	3a) Name LAST or BUS SAGADAH	SINESS, FIRST, MI	L ESTATE	ĨÃĨSŚŚŌĊŦÂĨŌ	r`T∩M	-j ·	
	3c) Name, LAST or BUS			110000±111.		J .	
			•				
	3e) Mailing Address. 153 FRONT	STREET					
	30 GROWI	. OIRE.	<u> </u>	<del></del>		3gj State	_ sn) zip code
	BATH					ME	04530
4. GRANTOR/	4a) Name, LAST or BUS					<del>-</del> -	
SELLER	OPEN WIN	DOW PRO	OPERTIES,	LLC	·	_  '	
	4c) Name, LAST or BUS	SINESS, FIRST, ML				1 1	
					<del></del>	J	
	4e) Mailing Address 254 CENT	ים יש"בי	2 pro				
	<u> </u>						,
	BATH					4g).St አለሙ	
	DAIN					ME	04530
5. PROPERTY	5a) Map	Block	Lot	Sub-Lot	5b) Type of propert	y—Enter the code numbe rty being sold. (See instruc	r that best
	27		115	c	heck any that appl	• •	dolls)
	5c) Physical Location				No tax maps		
ļ	94 FRONT	STREET			Multiple parc  √  Portion of par	ì	
6. TRANSFER TA	V		******		14 Lougou or bar	1	•
O. INANSFER IA	6a) Purchase	Price (If the tra	nsfer is a gift, enter	"0")	ба		0.0
			a value <b>only</b> if you e	entered "0" in 6a) o			500.00
	•	nominal value) .— .			6b		
	6c) Exemption	claim - Che	ck the box if either gr	antor or grantee is o	laiming exemptio	n from transfer tax and	l explain.
7. DATE OF TRA	NŞĘER_(MM-DD-YYY	Y) 8. WARI	ING TO BUYER-If the	property is classifie	d as Farmland, Op	en Space, Tree Growth	, or Working Water-
	0-2018	tront a s	ubstantial financial pe	enalty could be trigg	jered by developn	nent, subdivision, parti	tion or change in use.  CLASSIFIED
9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were	there any special	circumstances	. 10. INCOME	TAX WITHHELD-	Buyer(s) not required	
in the transfer w	hich suggest that the	price paid was ei	ither more or less 🖰	)	_	income tax because:	
than its fair mari	ket value? If yes, check	k the box and exp	ilain:	<del></del>		s qualified as a Maine r	esident n the State Tax Assessor
Roc	of easement bet	ween neighbo	ring parcels.			ration for the property	
					Foreclose		
11.OATH	Aware of penalt	ties as set forth b	y Title 36 §4641-K, we	hereby swear or af	firm that we have	each examined this re	turn and to the best of
	(10)	ا ۱۱	1 MI	6-14 1A	(1)	ithorized agent(s) are r	equired to sign below:
	Grantee CVVV &	Mens Mens			. —————————————————————————————————————	EX XVIULY 10	2. Date 2/20/18
12. PREPARER	Grantee	WEISS DERICE P	Date A	Granto		2074420000	Date
	Name of Preparer	P.O. Box 662		<del></del>	Priorie Number.	ad@legacy-lic.com	
	Mailing Address	Bath, Maine	04530		E-Mail Address Fax Number	2074420003	
					. un itallibei		·

DLN: 1001840028399

## **MAINE REVENUE SERVICES**

Registry	Sagadahoc
Date Recorded	05/31/2018
Time Recorded	03:29:00 PM
Transfer Tax Amount	\$902.00
Document Number	2018r-03481
Book	2018
Page	3481
BOOK/PAGE—REG	ISTRY USE ONLY
T	Con-
(MI) 3b) SSN or Feder	ral ID

DO NOT	DE DDOCECC	REAL ESTATE TRA			Date Recorded	05/31/2018	)
	RE-PROCESS.	DECLARA			Time Recorded	03:29:00 P	M
KE	TTD	TITLE 36, M.R.S.A. SECTIO	NS §§4641-4641N	Trans	sfer Tax Amount	\$902.00	
Sagadaho	c				cument Number		<del></del>
1. County						2018	
BATH	<del>-</del>						
2. Municipality	/Township				ū	3481	
3. GRANTEE/ PURCHASER	MUNRO-LUDD 3a) Name (LAST) 3c) Name (LAST)	PERS VICTORIA (FIRST)		L (MI)	3b) SSN or Fede	eral ID	
	45 CHESTNUT	ST					
	3e) Mailing Address						—
	BATH				ME		
4. GRANTOR/ SELLER	ANDERSEN 4a) Name (LAST)	RYAN (FIRST)		D. (MI)	3g) State 4b) SSN or Fede	3h) Zip Code	
	4c) Name (LAST)  45 CHESTNUT  4e) Mailing Address  BATH	(FIRST)		(MI)	4d) SSN or Fede		
	4f) City				4g) Si		de
5. PROPERTY  6. TRANSFER TA	45 CHESTNUT	ST BATH MAINE 0453	ub-Lot descr	bes the property any that apply No tax maps ex Multiple parcel Portion of parc	kist ls el 0.12 5d) Acreage		
		(If the transfer is a gift, enter "0"		6a	\$205,000		.00
	6b) Fair Market Valu if 6a) was of nomin	ue (enter a value <b>only</b> if you ent al value)	ered "0" in 6a) or	6b			.00
		- Check the box if either grant					
05 MONTH	1018 DAY YEAR	8. WARNING TO BUYER-If the profront a substantial financial pena					use.
in the transfer w	UMSTANCES—Were there a thich suggest that the price p ket value? If yes, check the bo	paid was either more or less	10. INCOME TAX	i X Seller has A waiver h	Buyer(s) not required ncome tax because: qualified as a Maine as been received fro tion for the property re Sale	resident m the State Tax Ass	sessor
11. OATH	Aware of penalties as sour knowledge and belie	set forth by Title 36 §4641-K, we he f, it is true, correct, and complete. C	ereby swear or affirm t	hat we have e	ach examined this re	eturn and to the be	est of
	Grantee RYAN D. Al				L MUNRO-LUD		
	Grantee	Date 05/31				Date 05/31/	
12. PREPARER		IY GIBSON		one Number_	(207) 482-7673		
	Mailing Address	0 CONGRESS STREET	E-N	Nail Address _	amy@titlene.com		

PORTLAND, ME 04102 Fax Number