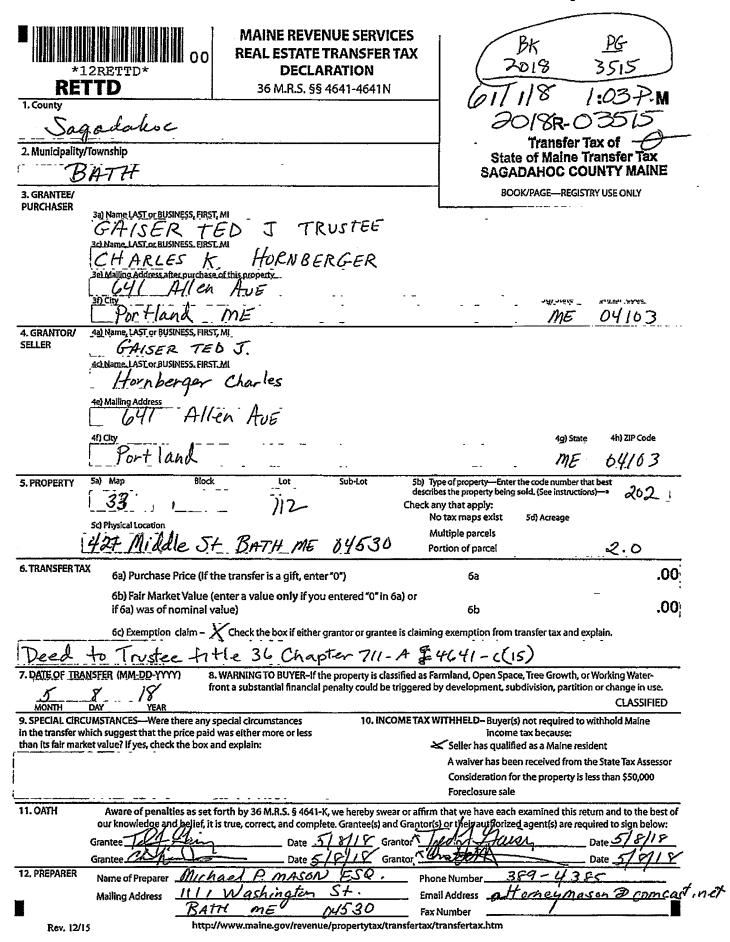
Merits: 0011856808743 Trips: 9182010010087



Merits: 0011856808242 Trips: 9182010010085

	12RETTD*	MAINE REVENUE SERVIC REAL ESTATE TRANSFER T DECLARATION 36 M.R.S. §§ 4641-4641N	AX	eil 118 1:03P.M
1. County Saga 2. Municipality BATH		<u> </u>		Transfer Tax of O State of Maine Transfer Tax SAGADAHOC COUNTY MAINE (2018 — 3516)
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRS MARCO Todd A 3c) Name LAST or BUSINESS, FIRS Toustees of 3e) Mailing Address after purchase 3f) City BEACO 3f) City	L. McKenna Kari M. He 50 BEACON Street othis property.	et Trust	BOOK/PAGE—REGISTRY USE ONLY
4. GRANTOR/ SELLER	BATH 4a) Name, LAST or BUSINESS, FIRS REA MAR ACL Name, LAST or BUSINESS, FIRS 4e) Mailing Address 5 8 BEACON 4f) City BATH	THA E		ME 04536 40) State 4h) ZIP Code ME 04530
5. PROPERTY	5a) Map Block 20 5c) Physical Location 50 BEACON	ST BATH ME 04530	5b) Type of property- describes the property Check any that apply No tax maps ex ' Multiple parce Portion of parc	Enter the code number that best y being sold. (See instructions)—> 202 r: xist 5d) Acreage
6. TRANSFER TA	6a) Purchase Price (If t 6b) Fair Market Value (if 6a) was of nominal v	he transfer is a gift, enter "0") enter a value only if you entered "0" in 6a	6b	.00
D3 MONTH	D TO TRUSTEE TANSFER (MM-DD-YYYY) 8 7 18 fr DAY YEAR	Tette 36 CHAPTER 7 WARNINGTO BUYER—If the property is classiont a substantial financial penalty could be tri	IIA \$ 464 fied as Farmland, Ope ggered by developme	n Space, Tree Growth, or Working Water- ent, subdivision, partition or change in use.
in the transfer w	UMSTANCES—Were there any shich suggest that the price paid ket value? If yes, check the box a	was either more or less	Seller has A walver h	Suyer(s) not required to withhold Maine ncome tax because: qualified as a Maine resident las been received from the State Tax Assessor tion for the property is less than \$50,000 re sale
11.OATH	Aware of penalties as set if our knowledge and belief, it Grantee Veal K /	is true, correct, and complete. Grantee(s) and	Grantor(s) or their autitor Masslee	
12. PREPARER Rev. 12/1	***************************************	Washington St Washington St MME 04530 /www.maine.gov/revenue/propertytax/tran	Phone Number Phone Number Fax Number Street Street Phone Number Street Street Street Phone Number Phone Phone Number Phone P	389.4385 attorneymason Domeast. net

PROCESSED

DLN: <u>1001840028674</u>

_	U DIE	MAINE REVENU	JE SERVICES	s l			Registry	Saga	dahoc	
	ILINE.	REAL ESTATE TR	RANSFER TA	x		Date R	lecorded	06/01	/2018	
	RE-PROCESS.	DECLAR	ATION			Time R	Lecorded	02:05	5:00 PI	 М
<u>RE</u>	TTD	TITLE 36, M.R.S.A. SECTI	ONS §§4641-4	641N	Trans		Amount			
Sagadaho	oc						Number			10
1. County					D	oument	•		<u>K-033</u>	17
BATH							Book .			
2. Municipality	·/Township						Page .	3519		
3. GRANTEE/						BOOK/F	PAGE—REGI	STRY US	E ONLY	
PURCHASER	THREE ACORN	IS, LLC								
	3a) Name (LAST)	(FIRST)			(Mi)	3b)	SSN or Feder	al ID		
	3c) Name (LAST)	(FIRST)			(MI)	3d)	SSN or Feder	al ID		
	361 B MAIN ST	REET								
	3e) Mailing Address									\neg
	YARMOUTH 3f) City						ME		1096	
4. GRANTOR/							3g) State	3n).	Zip Code	
SELLER		REAL ESTATE ASS	OCIATION		***			11.4		
	4a) Name (LAST)	(FIRST)			(MI)	46)	SSN or Feder	al ID		
	4c) Name (LAST)	(FIRST)			(MI)	4 d\	SSN or Federa	-LID		
	53 FRONT STRI				(1111)	4 u)	33N OF FEGER	al ID		
	4e) Mailing Address	215.1								
	BATH						ME	\bigcap	530	
	4f) City						4g) Sta		th) Zip Coc	ie .
5. PROPERTY		116					code number		202	
	27 L	ock 116	Sub-Lot C		that apply		l. (See instruct	tions)»	303	
	96 FRONT STRI	PEC.			ax maps e tiple parce		0.70		7	
	5c) Physical Location	3E1			ion of parc	_{:el} L	0.70 d) Acreage		J	
6. TRANSFER TA	7X				Г					
		If the transfer is a gift, enter "(·		6a [\$280,0	900			.00
	6b) Fair Market Valu if 6a) was of nomina	ie (enter a value only if you ei al value)	ntered "0" in 6a) o	or	6b					.00
										,
	6c) Exemption claim	- Check the box if either gra	intor or grantee is o	claiming	exemption	i from tran	sfer tax and	explain.		
	ANSFER (MM-DD-YYYY)	WARNING TO BUYER-If the performance of the							-	
	01 2018 DAY YEAR	mane a sassantia mianciai per	iaity todia be ing	gerea by	acte.op	crit, subur	nsion, parti		CLASSI	
	UMSTANCES—Were there a	ny special circumstances	10. INCOME	E TAX WI	THHELD-	Buyer(s) no	ot required t	o withho	old Maine	
	hich suggest that the price p ket value? If yes, check the bo			177		ncome tax	r because: as a Maine re			
than 15 fall filan	net value. If yes, effect the oc	ix and explain.				•	eceived from		te Tax Ass	essor
							e property i			
					Foreclosu					
11. OATH	Aware of penalties as s our knowledge and belie	set forth by Title 36 §4641-K, we f, it is true, correct, and complete.	hereby swear or a . Grantee(s) and Gr	iffirm that rantor(s)	t we have e or their aut	each exam thorized ac	ined this ret gent(s) are re	turn and equired t	to the be to sian be	est of slow:
		OCK REAL ESTATE A68			REE AC			_ Date_	06/04/	2018
	Grantee		04/2018 Granto					_ Date .	06/04/	2018
12. PREPARER	Name of PreparerSTG	ODDARD SMITH		Phone	Number_	(207) 721	-0622			_
	Mailing Address 49	PLEASANT STREET		E-Mail	Address .	officema	nager@mair	estatelav	v.com	
	BR	UNSWICK, ME 04011		Fax Ni	ımber -					

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840028785

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc					
Date Recorded	06/04/2018					
Time Recorded	09:00:00 AM					
Transfer Tax Amount	\$638.00					
Document Number	2018r-03528					
Book	2018					
Page	3528					
BOOK/PAGE—REGISTRY USE ONLY						
3.4						

RE'	TTD	TITLE 36, I	M.R.S.A. S	ECTIONS §§	- 34641-46	641N	_				9:00:00 A	<u>IM</u>
Cocodobo			7				Tran	isfer Ta	ax Am	ount <u>\$</u>	638.00	
Sagadaho	OC						D	ocume	nt Nun	nber <u>2</u>	018r-035	28
					1				В	look <u>2</u>	018	
BATH	Tavaskia		-		_	İ			F	Page 3	528	
2. Municipality	/ Iownsnip							вос		-	RY USE ONLY	
3. GRANTEE/ PURCHASER	MARKS 3a) Name (LAST)		EFFRE	Y		L	M (MI)		3b) SSN c	or Federal II)	
	MARKS 3c) Name (LAST)	_	/IEGAN				A (MI)		3d) SSN c	or Federal II)	
	11 VALLEY 3e) Mailing Address	RD										
	BATH 3f) City		9.119							ME State	04530 3h) Zip Code	<u> </u>
4. GRANTOR/ SELLER	INJ LLC 4a) Name (LAST)	(FI	RST)				(MI)		4b) SSN o	or Federal II)	
	4c) Name (LAST)		RST)				(MI)	ļ	4d) SSN o	or Federal II)	
	9 KIMBERL 4e) Mailing Address	Y CIR										
	BRUNSWIC	K								ME 4g) State	04011 4h) Zip Co	ode
5. PROPERTY	5a) Map 11 VALLEY 5c) Physical Location	Block RD	144 Lot	Sub-Lot		describes neck any No t Mult		ty being s y: exist els	sold. (See	number tha instruction 10 eage		
6. TRANSFER TA	6a) Purchase P	rice (If the transfer	is a gift, er	nter "0")			ба -	\$144	1,900			.00
	6b) Fair Market if 6a) was of no	t Value (enter a valu ominal value)	ie only if y	ou entered "(0" in 6a) o	r	6b					.00
	6c) Exemption o	laim – 🔲 Check the	e box if eith	er grantor or g	rantee is cl	laiming (exemptio	n from t	ransfer t	ax and ex	plain.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY 22 2018 YEAR			f the property ial penalty cou	ld be trigg	ered by o	developm	ent, sub	odivision	, partitior	or change in CLASS	i use. SIFIED
in the transfer w	CUMSTANCES—Were the plant	rice paid was either n			. INCOME	X	Seller has A waiver	income s qualifie has bee ation foi	tax beca ed as a M n receive	ause: Maine resided from the	vithhold Mair dent ne State Tax A ess than \$50,0	ssessor
11. OATH	our knowledge and	es as set forth by Title belief, it is true, corre	ct, and com	plete. Grantee	(s) and Gra	ntor(s) c	r their au	thorized	d agent(:	s) are requ	uired to sign b	pelow:
	Grantee INJ LLC	<u>~</u>	Duic ,	06/04/2018 06/04/2018			FREY N GAN A				Date <u>06/04</u> Date <u>06/04</u>	
12. PREPARER	Grantee	MARK WALTZ	Date .	00/0 //2010	Grantor			(2.0.0)	798-461		Date	,2016
	Name of Preparer	PO BOX 177					Number.			ı aytitle.co		
	Mailing Address -	BRUNSWICK, ME	04011			Fax Nu						

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

PROCESSED

DLN: 1001840028760

ONLINE.		F	MAINE REVENUE SERVICES			Registry	Sagadarioc	
		R	EAL ESTATE TRAN	SFER TAX		Date Recorded	06/04/2018	}
	RE-PROCES		DECLARATION			Time Recorded	10:43:00 A	 M
<u>KE</u>	TTD	TITLE	36, M.R.S.A. SECTIONS	\$§4641-4641	N Trans	sfer Tax Amount	\$0.00	
Sagadaho	ос					ocument Number		555
1. County							2018	
BATH	-							
2. Municipality	r/Township					ū	3555	
3. GRANTEE/			-			BOOK/PAGE—REC	SISTRY USE OINLY	
PURCHASER	DEVINE, To	RUSTEE	CELIA WOLF		(MI)	3b) SSN or Fede	eral ID	
	CELIA WO	LF DEVINI	E TRUST (FIRST)		(MI)	3d) SSN or Fede	ral ID	
	41 HILLTO	P AVENUE	/					
	PROVIDEN	ICE				RI	02908	
	3f) City		·			3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	DEVINE 4a) Name (LAST)		PHILIP (FIRST)		E (MI)	4b) SSN or Fede	ral ID	
	DEVINE		CELIA WOLF					
	4c) Name (LAST)		(FIRST)		(MI)	4d) SSN or Fede	ral ID	
	41 HILLTO	P AVENUE	· •					
	4e) Mailing Address							
	PROVIDEN	CE				RI	02908	
	4f) City					4g) Si	tate 4h) Zip Co	de
5. PROPERTY	4		5	desc	ribes the propert	—Enter the code number y being sold . (See instru		
	5a) Map	Block	Lot Sub-	LOT —	any that apply No tax maps e			
	10 PUFFIN	LANE			Multiple parce			
	5c) Physical Location				Portion of parc	ei 5d) Acreage		
6. TRANSFER TA	6a) Purchase	Price (If the trar	nsfer is a gift, enter "0")		ба	\$0		.00
		et Value (enter a nominal value)	a value only if you entere	d "0" in 6a) or	6b	\$215,200		.00
	6c) Exemption	claim – X Che	eck the box if either grantor o	or grantee is claim	ina exemption	from transfer tax an	d explain	•
36 MRS s			e for the grantor as				а слр.ш.и	
7. DATE OF TRA	ANSFER (MM-DD-YYY)	Y) 8. WARN	IING TO BUYER-If the prope	erty is classified as	Farmland, Ope	n Space, Tree Growth	, or Working Wate	r-
05	21 2018	front a si	ubstantial financial penalty	could be triggered	d by developme	ent, subdivision, part	— ´	
MONTH	DAY YEAR						CLASSI	
	CUMSTANCES—Were to which suggest that the			10. INCOME TAX		Buyer(s) not required ncome tax because:	to withhold Maine	9
	ket value? If yes, check				_	qualified as a Maine	resident	
					$\nabla \cdot \cdot$	nas been received fro		
No consid	leration paid, de	eed to truste	e for the grantor as	beneficial or	Foreclosu	ition for the property re Sale	is less than \$50,00	JO
11. OATH			y Title 36 §4641-K, we herel					
		E DEVINE	correct, and complete. Gran Date 06/04/20			LF DEVINE, TR		
		WOLF DEVI				LF DEVINE TR		
12. PREPARER	Name of Preparer	DEIRDRE KY	Date			(207) 985-7000	Date	
	Mailing Address	62 PORTLAN	ID ROAD, ST. 25		Mail Address	dkyle@bergenparkir	ison.com	
	J -	KENNEBUNI	K, ME 04043		x Number			

PROCESSED DLN: 1001840028624

ONLINE.		MAINE REVE	NUE SERVICES	•	i	Registry _	Sagadanoc	
		C I	TRANSFER TAX	(Date R	ecorded _	06/05/2018	
	RE-PROCES	DECL	ARATION		Time R	ecorded (09:18:00 A	M
<u>KE</u>	TTD	TITLE 36, M.R.S.A. SE	CTIONS §§4641-46	541N Tra	ansfer Tax	Amount	\$646.80	
Sagadaho	oc					_	2018r-0357	70
1. County					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Book 2		<u> </u>
BATH						_		
2. Municipality	y/Township				BOOK /F	Page _		
3. GRANTEE/					BOOK/P	AGE—REGIS	TRY USE ONLY	
PURCHASER	ADAMS	CHEYEN	NE	N				
	3a) Name (LAST)	(FIRST)		(M	.l) 3b):	SSN or Federal	IID	
	3c) Name (LAST)	(FIRST)		(M	l) 3d):	SSN or Federal	ID	
		R STREET COURT			, Ju).	33N OF FEDERAL		
	3e) Mailing Address						· · · · · · · · · · · · · · · · · · ·	
	BATH					ME	04530	
4 CDANITOD	3f) City					3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	PHENIX	KATHER	INE	A				
	4a) Name (LAST)	(FIRST)		(M		SSN or Federal	ID	
	PHENIX 4c) Name (LAST)	ERIKSEN (FIRST)	Í	P				
	1461 MAIN				i) 4d):	SSN or Federal	טו	
	4e) Mailing Address	KOAD						
	PHIPPSBUF	RG				ME	04562	
	4f) City					4g) State		de
5. PROPERTY	21	126		5b) Type of prope describes the prop				
	5a) Map	Block Lot		neck any that ap	ply:	,	202	
	11 DUMME	R STREET COURT		No tax maps Multiple par		0.08		
	5c) Physical Location			Portion of pa	arcel 5c	d) Acreage		
6. TRANSFER TA	AX 6a) Purchase	Price (If the transfer is a gift, ent	er "0")	ба	\$147,0	00		.00
	6b) Fair Marke	et Value (enter a value only if yo	ou entered "0" in 6a) o	r]]
	if 6a) was of n	ominal value)		6b	+			.00
	6c) Exemption	claim – Check the box if either	r grantor or grantee is cl	laiming exempti	on from trans	sfer tax and e	explain.	
7. DATE OF TR	ANSFER (MM-DD-YYY							
06	01 2018	front a substantial financial	penalty could be trigge	ered by develop	ment, subdiv	ision, partitio	on or change in CLASSII	
9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were t	here any special circumstances	10. INCOME	TAX WITHHELD	– Buver(s) no	t required to	withhold Maine	
in the transfer v	which suggest that the	price paid was either more or less			income tax	because:		
than its ian mar	rket value? If yes, check	the box and explain:			as qualified a er has been re		sident the State Tax As:	sessor
				Conside	eration for the		less than \$50,00	
11. OATH	Augus of non-12	ing as sat fouth by Title 25 54541 V	we havely success and		sure Sale	mad sk t t	una anales dist	
II. VAIR		ies as set forth by Title 36 §4641-K, d belief, it is true, correct, and comp	lete. Grantee(s) and Gra	intor(s) or their a	authorized ag	ent(s) are red		
				CHEYEN	NE M ADA	MS	Date 06/05/	
12 DDFD: 2-5	Grantee		06/05/2018 Grantor				Date 06/05/	2018
12. PREPARER	Name of Preparer	CARLY JOYCE 970 BAXTER BLVD SUITE 204	1	Phone Numbe	1 01	-7277 settlement.co		
	Mailing Address	PORTLAND, ME 04103	ī	E-Mail Address Fax Number	,carrys@ll	settlement.co	7.11	
				· un Hallibel				

111

		Mer	its: 0011856809	9555 Trips: 9182010010
	00 12RETTD*	MAINE REVENUE SERVIC REAL ESTATE TRANSFER T DECLARATION TITLE 36, M.R.S.A. SECTIONS §§4641	TAX	06/11/2018 02:25 PM
1. County				2018R-03725
SAGADA	HOC			Transfer Tax of 484.00
2. Municipalit	y/Township		/	SAGADAHOC COUNTY MAINE
BATH	· · · · · · · · · · · · · · · · · · ·			2018 - 3725
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRE TAY, LIN 3c) Name, LAST or BUSINESS, FIRE 1.7 BLUFF ROZ 3f) City BATH	T.M.	B B B B B B B B B B B B B B B B B B B	OK/PAGE—REGISTRY USE ONLY ME 04530
4. GRANTOR/ SELLER	44) Name, LAST or BUSINESS, FIR HART, CARRII 44) Name, LAST or BUSINESS, FIR HART, BONNII 44) Mailing Address 31 LAKEVIEW 46) City WEST BATH	E E		49) State 4h) Zip Code ME 04530
S. PROPERTY	5a) Map Bloc	46	5b) Type of property—Enter describes the property being Check any that apply: No tax maps exist Multiple parcels Portion of parcel	r the code number that best sold. (See instructions)—> 5d) Acreage
6.TRANSFERT	AX 6a) Purchase Price (If	the transfer is a gift, enter "0")	6a	110000.00
	6b) Fair Market Value if 6a) was of nominal	(enter a value only if you entered "0" in 6 value)	ia) or 6b	.00

	oay raichase ri	re (ii tile namer på dirkettet o)		va	TT0000 10
	6b) Fair Market' if 6a) was of no	ed "0" in 6a) or	6b	.0	
	6c) Exemption cl	aim - Check the box if either granto	or grantee is claiming exe	emption from tr	ansfer tax and explain.
			** <u></u>		
	NSFER (MM-DD-YYYY) -2018 DAY YEAR	8. WARNING TO BUYER-If the prop front a substantial financial penalty			e, Tree Growth, or Working Water- division, partition or change in use. CLASSIFIED
in the transfer w		ere any special circumstances	✓ Se □ A v □ Co	income iller has qualifie waiver has beer	not required to withhold Maine tax because: d as a Maine resident n received from the State Tax Assesso the property is less than \$50,000
11. OATH		s as set forth by Title 36 54641-K, we here sellef, it is true, correct, and complete. Gra Date Date			
12. PREPARER	Mattie of Preparer	avid A. King, Esq 08 Front Street, Bath, ME 04530	Phone No.	ddress lawoffic	e_davaking@comcast.net

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

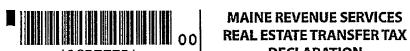
Merits: 0011856809861 Trips: 9182010010123



MAINE REVENUE SERVICES

	2RETTD*	OO RE	AINE REVENU AL ESTATE TRA DECLARA 6, M.R.S.A. SECTIO	ANSFER TAX TION		(2	BK 018 —	26 375	
1. County	110	I III LE 3	0, IVI.K.S.A. SECTIC	/NS 99404 1-404			3 10	40 1	M
SAGADA	HOC					0018	8 R.O3	375	[
2. Municipality	Township				_	Tr State at	ansfer Ta Maine Tra	KOT	<u></u>
BATH						AGADAI	ICC COU	IAM YTK	ÑE
3. GRANTEE/						BOOK/I	Pageregist	RY USE ONLY	, '
PURCHASER	3f) City	CK REAL	ESTATE A	SSOCIAT	ION		 ≾gj,≤tate	-310415.500 104530	ie
	BATH						ME	04530)
4. GRANTOR/ SELLER	4a) Name, LAST or BUS D AND P, 4c) Name, LAST or BUS 4e) Mailing Address 1 PAINTE	LLC	ROAD]] —			
	4f) City						4g) State	4h) Zip (Code
	PHIPPSBU	RG					ME	0456	2
5. PROPERTY	5a) Map 27 5c) Physical Location 166 FRONT	Block	247)	d	b) Type of propi escribes the projeck any that ap No tax map Multiple pa	perty being solo pply: s exist 5 rcels	code number the l. (See instruction d) Acreage	at best ss)—»	
6. TRANSFER TA	X 6a) Purchase	Price (If the trans	er is a gift, enter "0"	<u> </u>	6:				.00
		et Value (enter a v ominal value) —	alue only if you en	tered "0" in 6a) or	6l		sfer tax and ex		00.00
			<u></u>						
MONTH 9. SPECIAL CIRC in the transfer w than its fair man	DAY YEAR UMSTANCES—Were thich suggest that the ket value? If yes, check	front a sub here any special cir price paid was eithe the box and explai	er more or less '—'	10. INCOMET	TAX WITHHELI Seller I	Oment, subdi O-Buyer(s) no income ta nas qualified a er has been re	vision, partition	or change i CLAS withhold Mal dent he State Tax A	in use. SSIFIED Ine Assessor
						osure Sale			
11. OATH	Aware of penalt our knowledge an Grantee Oriva C	belief, it is true, co	Title 36 \$4641-K, we have the street, and complete. Note Date 13 10 10 10 10 10 10 10	Grantee(s) a <u>nd Gra</u> r	rm that we ha ntor(s) on their	authorized a	gent(s) are req	uired to sign	below:
12. PREPARER	Name of Preparer	P.O. Box 662			Phone Numb	ad@leaan	v-lin com	-	
=	Mailing Address	F.U. BOX 652			E-Mail Addres	-			
		Bath, Maine 04	530		Fax Number	20744200	03		

Merits: 0011856810960 Trips: 9182010010121



1	.2RETTD	DECLARATI	ON	1 0	~		
RE1	ITD	TITLE 36, M.R.S.A. SECTION	S §§4641-4641N	612	18 10:	421 M	
1. County					8R-03		
SAGADAI	HOC			_	Transfer Tes		
2. Municipality/	/Township			Stata	at Hillia Tea	MARONTAN	
BATH			1		2018—	3132)	
3. GRANTEE/				ВОО	K/PAGE—REGISTR	Y USE ONLY	
PURCHASER	3a) Name LAST or BUSIN	NESS, FIRST, MI LLC					
	3c) Name LAST or BUSI	NESS, FIRST, MI					
	t	D POINT ROAD			agi State	sn: <u>Zib rode</u>	
	PHIPPSBU	RG			ME	04562	
4. GRANTOR/ SELLER	4a) Name, LAST or 8USII SAGADAHO		SOCATION				
	4cl Name, LAST or BUSI	NESS, FIRST, MI					
	4e) Mailing Address 53 FRONT	STREET			,		
	4f) Giy BATH				49) State ME	4h) Zip Code 0 4 5 3 0	
5. PROPERTY	5a) Map 27 5c) Physical Location 166 FRONT	Block Lot Sul	describ Check ar	pe of property—Enteres the property being any that apply: to tax maps exist altiple parcels artion of parcel			-
6. TRANSFER TA	\ <u> </u>		, 'Ā),,			0.0	00
or crambic and	6a) Purchase i	Price (If the transfer is a gift, enter "0")	1//	ба			JU =
	6b) Fair Marke if 6a) was of n	et Value (enter a value only if you ente ominal value)	red "0" in 6a) or	6b		500.0	00
	6c) Exemption	claim – [] Check the box if either granto	r or grantee is claimin	g exemption from t	ransfer tax and ex	plain.	
7. DATE OF TRA	ANSFER (MM-DD-YYY) 3-2018	Y) 8. WARNING TO BUYER-If the profront a substantial financial penalt	perty is classified as Fa y could be triggered b	rmland, Open Spac y development, sul	e, Tree Growth, or odivision, partition	Working Water- or change in use.	
		there any special circumstances	10. INCOMETAX V	/ITHHELD-Buyer(s		vithhold Maine	
in the transfer w		price paid was either more or less —'			etax because: ed as a Maine resid	lent	
in the transfer w	which suggest that the rket value? If yes, check	price paid was either more or less —'	:	Seller has qualifi A waiver has bee	ed as a Maine resion on received from the or the property is le	e State Tax Assesso	or
in the transfer w	which suggest that the rest value? If yes, check Access Easement Aware of penalt our knowledge and Grantee	price paid was either more or less '' the box and explain:	eby swear or affirm th	Seller has qualifi A waiver has bee Consideration fo Foreclosure Sale	ed as a Maine resident received from the received from the received from the received from the received this return dagent(s) are required.	e State Tax Assessons than \$50,000 and to the best o	
in the transfer w than its fair mar	vhich suggest that the ket value? If yes, check Access Easement Aware of penalt our knowledge an	price paid was either more or less the box and explain: to Neighboring Parcel les as set forth by Title 36 \$4641-K, we help belief, it is true, correct, and complete. Grand	reby swear or affirm the antee(s) and Grantor(s) Grantor(s) Grantor(s)	Seller has qualifi A waiver has bee Consideration fo Foreclosure Sale	ed as a Maine resident received from the rite property is less than the received this return dagent(s) are required.	ne State Tax Assessons than \$50,000 and to the best outlined to sign below Date 13 June 2	
in the transfer w than its fair mar	which suggest that the refer value? If yes, check Access Easement Aware of penaltic our knowledge and Grantee	price paid was either more or less the box and explain: to Neighboring Parcel les as set forth by Title 36 \$4641-K, we help belief it is true, correct, and complete. Grant Date Date	reby swear or affirm the antee(s) and Grantor Grantor Pho	Seiler has qualifi A waiver has bee Consideration fo Foreclosure Sale Sor their authorize Sor their authorize Sur J. Moke	ed as a Maine resident received from the received from the rather than the received this return dagent(s) are required from the received f	ne State Tax Assessons than \$50,000 and to the best outlined to sign below Date 13 June 2	

Merits: 0011856810262 Trips: 9182010010125



RETTD

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

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

PLEASE TYPE OR PRINT CLEARLY

BIT	PG
2018	3754
05/44	2018 Fart 2 DM

2018R-03754

1.COUNTY SAGADAI	SĄGĄDĄHOC			5	2018R-0 Transfer Tax of State of Maine T	f 2,882.00	
2. MUNICIPALIT BATH	Y/TOWNSHIP			, .		AGADAHOC COI K/PAGE—REGIST	
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) DAY, PHILIP R. 3c) Name (LAST, FIRST, MI) DAY, VALERINA	, , , , , , , , , , , , , , , , , , ,					
	3e) Malling Address 215 HIGH STREE 31) City SOUTH PORTLANI	T, UNIT	108		· · · · · · · · ·	3g) State ME	[*] 3h) Zīp Code <u>,041,06</u> ,
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) BATH RIVERWALK 4c) Name (LAST, FIRST, MI) 4e) Mailling Address 40 SOUTH STREE 4f) City MARBLEHEAD	T, ŞUİTI				4g) State MA	4h) Zip Code 01945
5. PROPERTY	5a) Map 26, — Sc) Physical Location BATH RIVERWALK	Lot 258		No tax maps Multiple par Portion of pa	exist cels		erty—Enter the code describes the property structions)
6. TRANSFER TAX	6a) Purchase Price (If the trans	fer is a gift, enter	″O″)	6a \$		_,_ 65	5000. 00
	6b) Fair Market Value (enter a v if 6a) was of nominal value)	alue only if you e	entered "0" in 6a) or	6b\$ <u>.</u>	<u></u>		
	6c) Exemption claim – Checl	the box if either gr	antor or grantee is clair	ming exemption from	n trans	fertax and expla	in.
	7. DATE OF TRANSFER (MM-DD-Y) 06-12-2018 MONTH DAY YEAR		Tree Growth, a Sub subdivision, partiti	JYER-If the property istantial financial per on or change in use.	nalty co	ould be triggered CLASSIFIED	by development,
	MSTANCES—Were there any special the price paid was either more or ox and explain:			A waiver h	qualifie as beer	Maine Income d as a Maine resi received from t	tax because:
11. OATH	Aware of penalties as set forth our knowledge and belief, KTs tru Grantee Hallama M Grantee Wallama M	e, correct, and comp	plete, Grantee(s) and Gr 6/12/18 Granto	rantor(s) or their auti or <u>AMM</u>	ach exa norized	agentis) are req	uired to sign below: Date <u>6/12/18</u>
12. PREPARER	Name of Preparer Bernstei	Date &	(1/2//8 Granto	Phone Number	·	-774-1200	Date
v-mpr v vs-md d 550 bel \$	reasing of the parcing	le Street		E-Mail Address		well@bssn	. COM

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DLN: <u>10</u>01840029786

MAINE REVENUE SERVICES

		MAINE R	EVENUE SERV	ICES	Ī		Registry	Sagadahoc	
	ILINE.	REAL EST	ATE TRANSFE	RTAX		Date R	Recorded	06/14/2018	3
	RE-PROCESS		CLARATION			Time R	Lecorded	08:59:00 A	M
KE	TTD	TITLE 36, M.R.S.	A. SECTIONS §§46	41-4641N	Tran		Amount	"	
Sagadaho	c						•	2018r-037	 67
1. County] ~	o o uni o i i	Book		<u> </u>
BATH							•		
2. Municipality/	Township					BOOK/I	Page PAGE—REGI	STRY USE ONLY	
3. GRANTEE/ PURCHASER							TAGE REGI	STITL OSE OIVE	=
	KAKOS, JR.	NICH(OLAS		(8.41)	21-2	CCN F-d	-LID	
	Sa) Name (CAST)	(Fino)			(MI)	30)	SSN or Feder	ai iu	
	3c) Name (LAST)	(FIRST)			(MI)	3d)	SSN or Feder	al ID	
	45 E. MILAN	ST							
	3e) Mailing Address							<u> </u>	
	BATH						ME	04530	
4. GRANTOR/	3f) City						3g) State	3h) Zip Code	
SELLER	FRANCES Y 4a) Name (LAST)	. KAKOS LIVING	TRUST		(141)		CCN	LIB	
	4a) Name (LAST)	(FINST)			(MI)	40)	SSN or Federa	aliu	
	4c) Name (LAST)	(FIRST)			(MI)	 4d)	SSN or Federa	al ID	
	45 E. MILAN	ST			7	,			
	4e) Mailing Address								
	BATH						ME	04530	
DDODEDTY	4f) City			-			4g) Sta		de
5. PROPERTY	27	187		describ	pe of property ses the proper	ty being sol c			
	5a) Map	Block Lot	Sub-Lot		ny that appl o tax maps e			<u> </u>	
	1 FISHER CC	OURT		 	ultiple parce		0.44		
TDANICEEDTA	5c) Physical Location				rtion of par	5	d) Acreage		
5. TRANSFER TA	6a) Purchase Pr	ice (If the transfer is a gift	t, enter "0")		6a	\$0			.00
	6b) Fair Market if 6a) was of no	Value (enter a value only	if you entered "0" ir	6a) or	6 h	\$179,6	500		00.
		<u></u>			6b				٠.٥٥
36 MPS 4		aim – $\overline{\mathbb{X}}$ Check the box if ed from Trust to be		ee is claimin	g exemptio	n from tran	sfer tax and	explain.	
	NSFER (MM-DD-YYYY) 01 2018	front a substantial fin	ER–If the property is clancial penalty could b						
MONTH	DAY YEAR							CLASS	IFIED
D. SPECIAL CIRC	UMSTANCES—Were the	ere any special circumstance rice paid was either more or	s 10. IN	COME TAX W		Buyer(s) no income tax		o withhold Main	e
	et value? If yes, check th				Seller has	qualified a	as a Maine re		
				5	==			n the State Tax As s less than \$50,0	
					Foreclosu		e property i	3 1633 triair \$50,0	00
1. OATH		s as set forth by Title 36 §46							
		belief, it is true, correct, and c ES Y. KAKOS LIVING		rantor N				equired to sign b Date <u>06/14</u>	
	Grantee		06/14/2019	rantor			·	Date 06/14	
2. PREPARER	Name of Preparer	MARK WALTZ		Phoi	ne Number	(207) 798	3-4611		
	Mailing Address _	PO BOX 177			ail Address	mmw@c	ascobaytitle.	com	
		BRUNSWICK, ME 04011		Favi	Number				

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DLN: 1001840029854

MAINE REVENUE SERVICES

	H DE	MAI	NE REVENU	UE SERV	/ICES	_ I		Registry	Sagadahoc	
	ILINE.	REAL	L ESTATE TE				Date F	Recorded	06/14/2018	3
	RE-PROCESS	S.	DECLAR	ATION					02:41:00 P	
RE'	TTD	TITLE 36,	M.R.S.A. SECTI	IONS §§4	641-4641N	Tran			\$893.20	
Sagadaho	oc									
1. County						٦ ا	ocument		2018r-0379	/ 3
BATH						1		Book	2018	
2. Municipality	r/Township							Page	3795	
3. GRANTEE/							BOOK/	PAGE—REG	ISTRY USE ONLY	
PURCHASER	MACARTHU	JR C	CHRISTOPE	HER						
	3a) Name (LAST)	(FI	IRST)			(MI)	3b)	SSN or Feder	al ID	
	3c) Name (LAST)	/EII	IRST)			(MI)		con 5 l	LIB	
	80 COURT S		NSI)			(MI)	3d)	SSN or Feder	al ID	
	3e) Mailing Address								_	
	BATH							ME	04530	
	3f) City							3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	ROGERS	K	YLE			C.				
	4a) Name (LAST)		IRST)			(MI)	4b)	SSN or Feder	ai ID	
	ROGERS 4c) Name (LAST)		RENEE			T.		·		
	746 HIGH ST		IRST)			T (MI)	4d)	SSN or Feder	alID	
	4e) Mailing Address	KEE1								
	BATH							ME	04530	
	4f) City							4g) Sta		de
5. PROPERTY	28		074			pe of property				
	5a) Map	Block	Lot	Sub-Lot	—— Check a	ny that appl	ý:		202	
	80 COURT S	TREET				o tax maps of Iultiple parco		0.18	li .	
	5c) Physical Location					ortion of par	cel 5	d) Acreage		
6. TRANSFER TA	AX 6a) Purchase Pr	ice (If the transfer	is a gift, enter "(0")		6a	\$203,0	000		00.
		Value (enter a valu	ue only if you e	ntered "0"	in 6a) or]
	if 6a) was of no	minal value)				6b				00.
	6c) Exemption c	aim – 🔲 Check the	e box if either gra	antor or gra	ntee is claimin	ng exemptio	n from trar	sfer tax and	l explain.	
	ANSFER (MM-DD-YYYY)		TO BUYER–If the postal financial per							
06 L	12 2018 DAY YEAR	TIONE a substan	mai manciai pei	naity could	be inggered i	by developii	ierit, subur	vision, parti	CLASSI	
9. SPECIAL CIRC	UMSTANCES—Were the			10. I	NCOME TAX V				to withhold Maine	9
	hich suggest that the po ket value? If yes, check tl		nore or less		Б	$\overline{\mathbf{X}}$ Seller has	income ta: qualified		esident	
			ш		Ī	A waiver	has been r	eceived fron	n the State Tax As	
					ŀ	- Consider Foreclosu		e property i	is less than \$50,00	00
11. OATH		s as set forth by Title				hat we have	each exam			
	our knowledge and l	belief, it is true, corre ROGERS							equired to sign be UR _{Date} _06/14/	
		T. ROGERS	Date 06/1	14/2018	Grantor	indolor	111-12 1917	CARIII	Date06/14/ Date06/14/	
12. PREPARER	Name of Preparer _	PHENIX TITLE SE	Dutc			ne Number.	(207) 77	1-0434	_ Date	
	Mailing Address 	119 MIDDLE STRI	EET		E-M	ail Address	lgrondin	@phenixtitle	e.com	
	<u>_</u>	PORTLAND, ME)4101		Fax	Number				

Merits: 0011856810165 Trips: 9182010010131

00							
12RETTD							

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	MARIANNA NA MARIANA L2RETTD*		ARATION	,	•				
RE	TTD	TITLE 36, M.R.S.A. SI	ECTIONS §§4641-	1641N	06/15/2018				
1. County					2018R-				
SAGADA	HOC				Transfer Tax State of Maine	· ·			
2. Municipality	/Township	· · · · · · · · · · · · · · · · · · ·			SAGADAHOC CO				
BATH		er en en en en en en en en en en en en en			(2018 -	- 3826)			
3. GRANTÉE/ PURCHASER	3a) Name LAST or BUSINI	ESS, FIRST, MI			BOOK/PAGE—REGISTI	RY USE ONLY			
	PINE STAT	· 			J [
	ACTIVITIES OF PRINCIPAL S] [
	3e) Mailing Address. 833 HIGH	STREET			J L				
	BATH	Page and a second and a second and a second and a second and a second and a second and a second and a second a			ME	04530			
4. GRANTOR/	4a) Name, LAST or BUSIN		a mortam		<u> </u>				
SELLER	DEBORA B.		5 TRUST		jl				
	4c) Name LAST or BUSIN	EDD_CIDAL_OTU] [
	4e) Mailing Address				. (
		INGTON STREET	<u>r</u>		~~~~~ 9	ı			
	4f) City		•	· · · · · · · · · · · · · · · · · · ·	4g) State	4h) Zip Code			
	BATH				ME	04530			
5. PROPERTY	Sa) Map	Block Lot	Sub-Lot	5b) Type of propert	y—Enter the code number th	at best			
J. I NOI LINI	21	008	3)		rty being sold. (See instruction				
	<u> </u>		ليحمط لم	No tax maps	•				
į	5c) Physical Location 1054 WASH	INGTON STREET		Multiple parc	1				
·	TOOT WHOIL	THOTON OTIMATI		Portion of par		<u>:</u>			
6.TRANSFERTA	AX 6a) Purchase P	rice (If the transfer is a gift, er	iter "Q")	б а (4	65000 .00			
	6b) Fair Market if 6a) was of no	:Value (enter a value only if y minal value)	ou entered "0" in 6a	or 6b		.00.			
	6c) Exemption c	laim – Check the box if eith	er grantor or grantee i	s cialming exemptio	on from transfer tax and ex	xplain.			
					 				
	ANSFER (MM-DD-YYYY) 1-2018 DAY YEAR	8. WARNING TO BUYER-I front a substantial financi	f the property is classi al penalty could be tri	fied as Farmland, Op ggered by developn	pen Space, Tree Growth, or nent, subdivision, partitio	r Working Water- on or change in use, CLASSIFIED			
9. SPECIAL CIRC	CUMSTANCES—Were th	ere any special circumstances		AE TAX WITHHELD-	-Buyer(s) not required to	withhold Maine			
	which suggest that the p rket value? If yes, check t	rice paid was either more or less he box and explain:		VI Sollar ha	income tax because: as qualified as a Maine resi	ident			
	The solution of the solution o	ist working copies		1-1	has been received from t				
					ration for the property is l	ess than \$50,000			
					ure Sale				
11.OATH	Aware of penaltie our knowledge and Grantee	s as set forth by Title 36 54641- belief, it is true, correct, and com	plete. Grantee(s) and	Grantor(s) or their a	e each examined this return uthorized (gent(s) are req	in and to the best of juired to sign below:			
	Grantee	Date	Gran			Date			
12. PREPARER		David A. King		Phone Number					
_	Mailing Address	108 Front Street, Bath, ME 04530)	E-Mail Address		omcast.net			
				Fax Number	207-442-7910	_			

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

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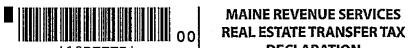
DLN: 1001840029968

	VLINE.	MAINE REVENUE	SERVICES	Ī	Registry	Sagadahoc	
		REAL ESTATE TRA			Date Recorded	06/15/2018	3
	RE-PROCES	DECEARA			Time Recorded	02:22:00 P	M
KE	TTD	TITLE 36, M.R.S.A. SECTIO	NS §§4641-4641N	Trans	sfer Tax Amount	\$660.00	
Sagadaho	oc				ocument Number)8
1. County						2018	<u></u>
BATH				}			
2. Municipality	y/Township			_	Page BOOK/PAGE—REG	3828	
3. GRANTEE/ PURCHASER					BOONFAGE—NEO	ISTRI OSL ONLI	===
TORCHASER	LEONARD	SUSAN		C.			,
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Fede	ral ID	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Fede	ral ID	
		ASS COURT			34) 3314 61 1 CdC	10115	
	3e) Mailing Address					· -	
	BATH				ME	04530	
4 CRANTOR/	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	MCLEOD	IVER		J			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Fede	ral ID	
	4c) Name (LAST)	(FIRST)		(MI)	1.0.500	-115	
	122 OAK S7			7 (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4d) SSN or Feder	raiiD	
	4e) Mailing Address	IREET					
	BATH				ME	04530	
	4f) City				4g) St		de
5. PROPERTY	31	019	5b) Ty descri	ype of property- bes the propert	Enter the code numbe y being sold . (See instruc	er that best ctions)—» 201	
	5a) Map		Check a	ny that apply	:		
	18 WINDLA	ASS COURT		lo tax maps e: Aultiple parce	ls 0.00		
	5c) Physical Location		P	ortion of parc	el 5d) Acreage		
6. TRANSFER TA	AX 6a) Purchase I	Price (If the transfer is a gift, enter "0")	1	6a [\$150,000		00.
		et Value (enter a value only if you ente			,]]
		nominal value)		6b			00. ا
	6c) Exemption	claim – Check the box if either grant	or or grantee is claimir	ng exemption	from transfer tax and	d explain.	
7. DATE OF TR	ANSFER (MM-DD-YYY)						
06	14 2018	front a substantial financial penal	ty could be triggered l	by developme	ent, subdivision, parti	ition or change in CLASSI	
MONTH 9 SPECIAL CIRC	DAY YEAR	there any special circumstances	10 INCOMETAX	WITHHELD -	Buyer(s) not required		
in the transfer v	which suggest that the	price paid was either more or less		i	ncome tax because:		=
than its fair mai	rket value? If yes, check	the box and explain:	ļ	≟	qualified as a Maine i las been received from		coccor
					tion for the property		
				Foreclosu			
11. OATH		ies as set forth by Title 36 §4641-K, we he d belief, it is true, correct, and complete. G					
	Grantee IVER J	MCLEOD Date 06/18/	/2018 Grantor S		-	Date <u>06/18/</u>	/2018
	Grantee	Date 06/18/				Date 06/18/	′2018
12. PREPARER	Name of Preparer		Pho		(603) 621-1525		
	Mailing Address	70 MARKET STREET			hhowell@mssg.com		
		MANCHESTER, NH 03101	Fax	: Number 💄			

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		MAINE REVENUE SER	VICES	Ī	Registry	Sagadahoc	
	ILINE.	REAL ESTATE TRANSFE	ER TAX	:	Date Recorded	06/15/2018	
	RE-PROCESS.	DECLARATION			Time Recorded		
RE	ΓTD	TITLE 36, M.R.S.A. SECTIONS §§4	1641-4641N		fer Tax Amount		<u> </u>
Sagadaho	c			1	cument Number		
1. County				1 200			<u>U</u>
BATH						2018	
2. Municipality	/Township				_	3830	
3. GRANTEE/					BOOK/PAGE—REG	ISTRY USE ONLY	
PURCHASER	JOHNSON 3a) Name (LAST)	MIRIAM (FIRST)		A (MI)	3b) SSN or Feder	ral ID	
	KANE 3c) Name (LAST)	CLAYTON (FIRST)		B _(MI)	3d) SSN or Feder	al ID	
	2 PARK STREE	ET					
	BATH 3f) City				ME 3q) State	04530 3h) Zip Code	
4. GRANTOR/ SELLER	ESLINGER 4a) Name (LAST)	FRANZ		W (MI)	4b) SSN or Feder		
	ESLINGER 4c) Name (LAST)	JANE (FIRST)		N (MI)	4d) SSN or Feder	al ID	
	1295 HIGH STR				4d) 55N OF Feder	מו וט	
	4e) Mailing Address					<u> </u>	\neg
	BATH 4f) City				4g) Sta	04530 4h) Zip Coo	
5. PROPERTY			5b) Ty	pe of property—	-Enter the code number	that best	
	20 E	Block Lot Sub-Lot		es the property ny that apply:	being sold . (See instruc	tions)—» 202	
				tax maps exi	1		
	2 PARK STREE	,T		ultiple parcels rtion of parce	el <u>0.00</u>		
6. TRANSFER TA	5c) Physical Location				5d) Acreage		
o. HIANSI EN IA	6a) Purchase Price	(If the transfer is a gift, enter "0")		6a (\$240,000		.00
	6b) Fair Market Val if 6a) was of nomir	ue (enter a value only if you entered "0" nal value)	'in 6a) or	6b			.00
	6c) Exemption claim	- Check the box if either grantor or gra	antee is claimin	g exemption I	from transfer tax and	l explain.	
7 DATE OF TRA	NICEED (MAN DD WWW)	O MARAUNG TO DUVED If the	-l:£l F-		Control Control		
06 MONTH	NSFER (MM-DD-YYYY) 15 2018 DAY YEAR	8. WARNING TO BUYER-If the property is front a substantial financial penalty could					use.
9. SPECIAL CIRC	UMSTANCES—Were there		NCOME TAX W		uyer(s) not required	to withhold Maine	
	hich suggest that the price ket value? If yes, check the b	paid was either more or less oox and explain:	2	Seller has q	ncome tax because: qualified as a Maine r as been received fror		sessor
		100.00.00		Foreclosure			
11. OATH		set forth by Title 36 §4641-K, we hereby sw ef, it is true, correct, and complete. Grantee(s					
	Grantee FRANZ W I			IRIAM A J	_	Date06/18/	
	Grantee JANE N ES			LAYTON E	B KANE	Date 06/18/	
12. PREPARER		RISTIN CONANT	Phor		(207) 774-4400 Ext		
	Maining Address	ATLANTIC PLACE			kconant@atlancoast.	com	
	SC	OUTH PORTLAND, ME 04106	Fax I	Number			

Merits: 0011856804507 Trips: 9182010010015



12RETTD RETTD			DECLARATION M.R.S. §§ 4641-4641N		06/18/2018 10:26 AM
1. County					2018R-03866
SAGADA	HOC				Transfer Tax of 286.00
2. Municipality	Township				State of Maine Transfer Tax SAGADAHOC COUNTY MAINE\
BATH					(2018-3866)
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSI	YESS, FIRST, MI	T-74174 T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-T-		BOOK/PAGE—REGISTRY USE ONLY
	MCCABE,	TIMOTHY M	ICHAEL JR		
	3e) Meiling Address effe 8 LUPINE	r purchase of this propert	y.		
	BATH				ME 04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSI OCTAGON	NESS, FIRST, MI PROPERTIE	S, LLC	·	<u> </u>
	4clName.LAST.or.BUSI	NESS, EIRST, MI			7
	4e) Mailing Address C/O SHAR	ON L. DRA	KE, 54 NORTH	STREET	
	40 City BATH				49) State 4h) ZIP Code ME 0 4 5 3 0
5. PROPERTY	28 5c) Physical Location B LUPINE	I.ANE	160 4		s exist 5d) Acreage
6. TRANSFER TA	X 6a) Purchase I	Price (If the transfer i	s a gift, enter "0")	6a	65000.00
	6b) Fair Marke if 6a) was of n		e only if you entered "0" in 6a	a) or 6b	.00.
	6c) Exemption	claim – Check the	box if either grantor or grantee	is claiming exempti	tion from transfer tax and explain.
7. DATE OF TRA	NSFER (MM-DD-YYY) 4-2018 DAY YEAR				Open Space, Tree Growth, or Working Water- pment, subdivision, partition or change in use. CLASSIFIED
in the transfer w		here any special circun price paid was either m the box and explain:			D-Buyer(s) not required to withhold Maine income tax because: has qualified as a Maine resident
				_ Consid	er has been received from the State Tax Assessor deration for the property is less than \$50,000 osure sale
11. OATH				Grantor(s) or their	have each examined this return and to the best of authorized agent(s) are required to sign below:
"an n	Grantee		Date Grai		Date
12. PREPARER	Name of Preparer	Jenny Burch 23 Centre Street	1	Phone Number	ionnyhurch207@amail.com
	Mailing Address	Bath, ME 04530		Email Address	207.443.3333
_				Fax Number	

Rev. 12/15

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

Merits: 0011856804706 Trips: 9182010010013



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!

06/18/2018 10:46 AM

2018R-03875

1. COUNTY	DO NOT	USE RED INK!	Tr.	ansfer Tax of 440	.00			
Sagad	lahoc		State	e of Maine Transf	pr Tax			
2. MUNICIPALIT	TY/TOWNSHIP		(7	2018 3	3875)			
BATH.	,		BOOKAN	AGE—REGISTRY US	SE ONLY			
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) SOMME 1 CR HOLD r 3c) Name (LAST, FIRST, MI)	VGS TRUST	•					
	3e) Mailing Address 739 RIVER ROAD 39 GBY ESDON				Zip Code 4 343			
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) Seaved 4c) Name (LAST, FIRST, MI) 4c) Name (LAST, FIRST, MI)				1			
	là Deel Ridge C anchy Augusta	.4 nej	-	Me 0	Zip Code 4330			
5. PROPERTY	5a) Map Block Lot 13.5c) Physical Location 20 & 22 OFFICE ORI	7-	nu	 Type of property- imber that best descri- ing sold. (See instructions) 5d) Acreage: 	ibes the property			
6. TRANSFER TAX	ба) Purchase Price (If the transfer is a gift, enter	."0")	6a		00			
	6b) Fair Market Value (enter a value only if you if 6a) was of nominal value)	entered "0" in 6a) or	6b _	100 0	00.00			
	6c) Exemption claim – Check the box if either g	rantor or grantee is claiming ex	emption from transfer	tax and explain.				
	7. DATE OF TRANSFER (MM-DD-YYYY) D6 13 2013 MONTH DAY YEAR	Tree Growth, a Substantial subdivision, partition or cl	. WARNING TO BUYER-if the property is classified as Farmland, Open Space or ree Growth, a Substantial financial penalty could be triggered by development, ubdivision, partition or change in use. CLASSIFIED					
which suggest t	UMSTANCES—Were there any special circumstances in hat the price paid was either more or less than its fair more and explain:	arket value?	METAX WITHHELD- Seiler has qualified a A waiver has been re Consideration for th	Maine income tax I as a Maine resident eceived from the St	because: ate Tax Assessor			
11. OATH	Aware of penalties as set forth by Title 36 \$4641- our knowledge and belief, it is true, correct, and com Grantee Correct Date	plete. Grantee(s) and Grantor(s	at we have each exam) or their authorized ag	gent(s) are required	I to sign below:			
	Grantee Date			Date				
12. PREPARER	Name of Preparer Reger Bintlif			7-841-739				
	Mailing Address 739 Rivel Rd	Me 04349 E-M	ail Address	ier Dintliff	ogmail.co			

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840029947

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/18/2018
Time Recorded	10:54:00 AM
Fransfer Tax Amount	\$1,122.00
Document Number	2018r-03884
Pools	2018

RETTD		TITLE 3	TITLE 36, M.R.S.A. SECTIONS §§4641-4641N				u l	Time Recorded 10:54:00 AM				<u>M</u>
							Tra	ansfer '	Tax Amou	nt <u>\$1,1</u>	22.00	
Sagadaho	oc							Docum	nent Numb	er <u>201</u>	8r-038	84
							+		Boo	ok 201	8	
BATH 2. Municipalit	·/T						i		Pas	ge 388	 4	
3. GRANTEE/	y/ IOWNSNIP						_	ВС	OK/PAGE—I			
PURCHASER	GOTTUSO 3a) Name (LAST)		MICHAI	EL			P)				
	GOTTUSO 3c) Name (LAST)		KRISTE	N			(N A	λ.	3b) SSN or F			
	5 REGATTA 3e) Mailing Address	LANE	(FIRST)					ll)	3d) SSN or F	ederal ID		
	BATH 3f) City							-			4530	
4. GRANTOR/									3g) Sta	ate 3h) Zip Code	
SELLER	BEAUCHAN 4a) Name (LAST)	ΜP	DION (FIRST)				F		4b) SSN or Fe	ederal ID		
	BEAUCHAN 4c) Name (LAST)	ИΡ	ELSIE (FIRST)				E		4 I) CCN - F			
	5552 DOVE	R CREST LI						''	4d) SSN or Fe	ederario		
	JACKSONV 4f) City	ILLE				-			FI		2258	
5. PROPERTY	41) City					55.) T			4g r the code nun) State	4h) Zip Co	de
	5a) Map 5 REGATTA 5c) Physical Location	Block LANE	75 Lot	Sub-Lot		descri Check a		erty being ply: s exist cels	9 sold . (See ins	tructions)—×		
6. TRANSFER TA	ΔY	rice (If the trans	for ic a gift on	-t"(O")		_		P 25	5d) Acreag	e		1 00
	6b) Fair Marke	t Value (enter a v)" in 6a) (or	6a	\$25	55,000			00.
	if 6a) was of no 6c) Exemption o		the box if eithe	er grantor or g	rantee is c	claimir	6b	Ь	transfor tay	and ovplain		.00
		<u></u>		g g.			ig exempti	011110111	Guisiei tax t	and explain	•	
06 MONTH	ANSFER (MM-DD-YYYY 2018 DAY YEAR	front a sub	IG TO BUYER-II stantial financi	f the property i al penalty coul	s classifie d be trigg	ed as F gered l	armland, O _l by develop	pen Spa ment, su	ce, Tree Grow Ibdivision, pa	vth, or Worl artition or c	king Wate hange in CLASSI	use.
in the transfer w	CUMSTANCES—Were the post of th	rice paid was eithe	er more or less	10.	INCOME	_	X Seller ha A waive	incomo as qualif r has bee	s) not require e tax because ied as a Main en received f or the proper	e: ne resident rom the Sta	ate Tax Ass	sessor
11. OATH		belief, it is true, co BEAUCHAMI	rrect, and com Date	plete. Grantee(06/18/2018	vear or af s) and Gra Grantor	antor(nat we have	e each e uthorize	xamined this ed agent(s) ar	re required	to the be to sign be 06/18/	elow:
	Grantee ELSIE E	BEAUCHAM	P Date _	06/18/2018	Granto		RISTEN	A GO	TTUSO	Date	06/19/	
12. PREPARER	Name of Preparer	SUSAN BAGLE		*		Pho	ne Number	(207)	321-5342			
	Mailing Address _	2320 CONGRES				E-M	ail Address	susan	@netinmaine	e.com		

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840030117

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/18/2018
Time Recorded	12:09:00 PM
Transfer Tax Amount	\$1,711.60
Document Number	2018r-03915
Book	2018
Page	3915
ROOK/DAGE DEG	ISTRY LISE ONLY

RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§4	4641-46411	v	Time Recorded	12:09:00 F	'M
			r		er Tax Amount	\$1,711.60	
Sagadah 1. County	ioc			Docu	ument Number	_2018r-039	15
				4	Book	2018	
BATH						3915	
2. Municipalit	ty/Township			4	BOOK/PAGE—REG		<u></u>
3. GRANTEE/ PURCHASER						ASTRI OSE ONE!	=
	PAULI 3a) Name (LAST)	SCOTT (FIRST)		H			
		·		(MI)	3b) SSN or Fede	ral ID	
	HARRIS 3c) Name (LAST)	CATHERINE (FIRST)		H (MI)	3d) SSN or Fede	rol ID	
	39 MINERA	AL SPRING ROAD		¬ '''''	Su) SSN of Fede	raiiD	
	3e) Mailing Address						
	WINDHAM	· ·			ME	04062	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	PINE STAT	E, LLC					
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	ral ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	al ID	
	833 HIGH S 4e) Mailing Address	TREET					
					— [T [
	BATH 4f) City				ME	04530	
5. PROPERTY			5b) T	voe of property—Fi	4g) Sta		ide
	26 5a) Map	Block Lot Sub-Lot	descri	bes the property be any that apply:	eing sold . (See instruc	tions)—» 201	
		200 200	<u>—</u> ¬П №	lo tax maps exist			
	833 HIGH S	TREET		Multiple parcels ortion of parcel	0.00		
6. TRANSFER T	5c) Physical Location		·	ortion or parcer	5d) Acreage		
01 110 (145) ER 1	6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a \$3	389,000		.00
		et Value (enter a value only if you entered "0"	in 6a) or				أ م
	if 6a) was of ne			6b			00.
	6c) Exemption	claim – 🔲 Check the box if either grantor or grai	ntee is claimir	ng exemption fro	m transfer tax and	explain.	
Г 1 Г	ANSFER (MM-DD-YYYY		classified as Fa	armland, Open S	pace, Tree Growth,	or Working Wate	r-
	14 2018	front a substantial financial penalty could	be triggered b	by development,	subdivision, partit	tion or change in CLASSII	
MONTH D. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were th	nere any special circumstances 10. If	NCOME TAX V	VITHHEI D- Ruya	er(s) not required t		
n the transfer v	vhich suggest that the p rket value? If yes, check	price paid was either more or less	_	inco	me tax because:		=
nam (3 ian mai	ret value: II yes, check	the box and explain:	F		alified as a Maine re been received from		
					n for the property i		
1 OATH			[Foreclosure S	ale		
1. OATH	Aware of penaltic our knowledge and	es as set forth by Title 36 §4641-K, we hereby swe belief, it is true, correct, and complete. Grantee(s)	ear or affirm the	nat we have each	examined this ret	urn and to the be	est of
	Grantee PINE ST	TATE TYO		COTT H PAU		Date06/18/	
	Grantee	06/19/2019		ATHERINE I		Date 06/18/2	
2. PREPARER	Name of Preparer	HEATHER HOWELL	Pho	ne Number <u>(60</u>)3) 621-1525		
	Mailing Address -	70 MARKET STREET	E-M	ail Address <u>hh</u>	owell@mssg.com		
		MANCHESTED NU 02101	-				

Merits: 0011856805610 Trips: 9182010010021



MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

PLEASE TYPE OR PRINT CLEARLY

	9900*	DECL TITLE 36, M.R.S.A.	- AKATION . SECTIONS 4641-	4641N	6191	18 10	12-A-M
RE	TTD	PLEASE TYPE C	······································			8 R-0	
1.COUNTY SAGADAF	ĮOC.,,,,		USE RED INK!		State	Trans for Ta of M aine Tr a	k of O
2. MUNICIPALIT BATH	Y/TOWNSHIP				_	2018— K/PAGE—REGIST	, /
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI) NATIONSTAR 3c) Name (LAST, FIRST, MI) 3e) Mailing Address						
	8950, ÇYPRES COPPELL	S, WATERS, B	<u> </u>			3g) State	3h) Zip Code ,75019
4. GRANTOR/ SELLER	4c) Name (LAST, FIRST, MI) 4e) Mailing Address	C DARKWAY			TION_		
	14221 DALLA 40 City DALLAS			<u>,,,,,</u>		4g) State	4h) Zip Code 75254
5. PROPERTY	5a) Map	168		Check	No tax maps exist Multiple parcels Portion of parcel	number that best	erty—Enter the code describes the property instructions) 201
6.TRANSFER TAX	ба) Purchase Price (If th	e transfer is a gift, enter	r"O")		6a \$	9 <u> </u>	.,0.00
	6b) Fair Market Value (e if 6a) was of nominal va		entered "0" in 6a) o	or	6b 🕏 💶		.,
	6c) Exemption claim - ✓ Confirmatory Deed.	_					
	7. DATE OF TRANSFER (MA 06-08-201 MONTH DAY	L8	Tree Growth, a : subdivision, par	Substantia rtition or c		ould be triggered CLASSIFIED	d by development,
If yes, check the	•			10. INCO	ME TAX WITHHELD	Maine income ed as a Maine res	
	dvertently conveyed	to FNMA and FNMA	did not	<u> </u>			the State Tax Assessor less than \$50,000
accept same. 11. OATH			nplete. Grantee(s) and	d Grantoki intor	nat we have each ex	amined this retu	rn and to the best of
12. PREPARER		stopher F. Log	an	Pho	ne Number	272-1400	
	Mailing Address 1080) Main Street tucket, RI 028	360	E-M	all Address clo	ogan@shsla	wfirm.com

DLN: 1001840030181

MAINE REVENUE SERVICES

Ω	NLINE.	MAINE RE	VENUE SERVICES	Registry	Sagadahoc
	RE-PROCESS.		TE TRANSFER TAX	Date Recorded	06/19/2018
		DEC	CLARATION	Time Recorded	10:30:00 AM
KE	TTD	TITLE 36, M.R.S.A.	SECTIONS §§4641-4641	N Transfer Tax Amount	
Sagadah	ос			Document Number	
1. County				1	
BATH				i	2018
2. Municipalit	y/Township			1	3927
3. GRANTEE/ PURCHASER			-	BOOK/PAGE—REC	JISTRY USE ONLY
, one in its in	DIRIGO CUST 3a) Name (LAST)	FOM STRUCTURE	ES, INC.	(MI) 3b) SSN or Fede	ral ID
	3c) Name (LAST)	(FIRST)		(MI) 3d) SSN or Fede	ral ID
	201 RIDGE RO	OAD		3d) 33N OF Fede	Tal ID
	3e) Mailing Address				
	BATH			ME	04530
4. GRANTOR/	3f) City			3g) State	3h) Zip Code
SELLER	BUBAR	SCOTT			
	4a) Name (LAST)	(FIRST)		(MI) 4b) SSN or Fede	ral ID
	4c) Name (LAST)	(FIRST)		(AAI)	
	201 RIDGE RO			(MI) 4d) SSN or Fede	al ID
	4e) Mailing Address	<u> </u>			
	BATH			ME	04530
	4f) City			4g) St	
5. PROPERTY	39	26		Type of property—Enter the code numbe ribes the property being sold. (See instruc	
	5a) Map	Block Lot	Sub-Lot Check	any that apply:	201
	74 WASHING	TON STREET	 	No tax maps exist Multiple parcels 0.24	
	5c) Physical Location			Portion of parcel 5d) Acreage	
6. TRANSFER TA	X 6a) Purchase Price	e (If the transfer is a gift, e	nter"0")	6a \$0	.00
		alue (enter a value only if			
	if 6a) was of nomi		,	_{6b} \$179,900	.00
	6c) Exemption clair	m – \overline{X} Check the box if eith	her grantor or grantee is claimi	ing exemption from transfer tax and	l explain.
36 M.R.S	.A. SECTION 465	1-c(19) Deed from	members to LLC who	ere there is no change in	beneficial ownership.
	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-	-If the property is classified as F	Farmland, Open Space, Tree Growth	or Working Water-
06	18 2018	front a substantial financ	ial penalty could be triggered	by development, subdivision, parti-	tion or change in use.
MONTH 9 SPECIAL CIRC	DAY YEAR	any special circumstances	10 INCOMETAV	MOTHER B. O. (1)	CLASSIFIED
in the transfer w	hich suggest that the price	e paid was either more or less	10. INCOME TAX	WITHHELD – Buyer(s) not required to income tax because:	o withhold Maine
than its fair mari	ket value? If yes, check the	box and explain: \overline{X}]	X Seller has qualified as a Maine r	
No Monet	ary consideration:	for conveyance		A waiver has been received from X Consideration for the property	
		•		Foreclosure Sale	
11. OATH	Aware of penalties as our knowledge and bel	s set forth by Title 36 §4641- lief, it is true, correct, and con	 -K, we hereby swear or affirm to applete. Grantee(s) and Grantor 	that we have each examined this re (s) or their authorized agent(s) are re	turn and to the best of
	Grantee SCOTT BU	BAR Date	06/19/2018 Grantor I	DIRIGO CUSTOM STRUCT	
	Grantee	Date	06/19/2018 Grantor		Date 06/19/2018
12. PREPARER	•	EB LAUSIER		one Number <u>(207) 775-7271</u>	
		OFFICE STREET OFFI AND ME 04101	E-N	Mail Address <u>dlausier@jbgh.com</u>	
	Pi	CANTELANIE MEHALIA	-	. N.L	

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DLN: 1001840030239

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/19/2018
Time Recorded	10:55:00 AM
Transfer Tax Amount	\$695.20
Document Number	2018r-03930
Book	
•	· · · · · · · · · · · · · · · · · · ·

RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641N			164111		I lille I	ecorueu .	10.33.00 2	HIVI	
		TITLE 50, W.N.S.A. SECT	10103 334041-4	104 IN	Tra	nsfer Tax	Amount	\$695.20	
Sagadah	oc			r	Ľ	Ocument	Number	2018r-039)30
1. County							Book	2018	
BATH							Page		
2. Municipalit	ty/Township					POOK /	_		
3. GRANTEE/ PURCHASER						BOOK	PAGE—REGI	STRY USE ONLY	-
TOTICHINSEN	FRASER	ADAM			W	·			
	3a) Name (LAST)	(FIRST)			(MI)) <u>3b)</u>	SSN or Federa	al ID	
	3c) Name (LAST)	(FIDCT)							
		PRTH STREET			(MI)	3d)	SSN or Federa	al ID	
	3e) Mailing Address	KINSIKEEI							
	BATH						ME	7 04520	
	3f) City						ME 3g) State	04530 3h) Zip Code	
4. GRANTOR/	EVISON-TR	DISTRE WILLIAM					39, 31410	31) Zip code	
SELLER	4a) Name (LAST)	RUSTEE WILLIAM (FIRST)			E.	(b)	SSN or Federa	110	
	EVISON-TR	• •				75)	Join of Federa	II ID	
	4c) Name (LAST)	(FIRST)			L (MI)	4d)	SSN or Federa	ALID.	
	179 GRAND	OAK			•	-lu/	John of Federa		
	4e) Mailing Address								
	VENICE						FL	04292	
	4f) City						4g) Stat	┛ ┗━━━	ode
5. PROPERTY	25	158		5b) Type of p				that best	
	5a) Map	Block Lot	Sub-Lot C	describes the heck any tha	t appl	y:	. (See Instructi	ions)—» 202	,
	192-194 NO	RTH STREET		No tax ı Multiple			0.16		
	5c) Physical Location	KIII SIKEEI		Portion		_{cei} L	0.16 d) Acreage		
6. TRANSFER T	ΔΥ	Price (If the transfer is a gift, enter "C	n")		6a	\$158,0			00.
		et Value (enter a value only if you er	-	~r	Ua	\$156,0			
	if 6a) was of n		nered o moa) c	Л	6b				.00
	6c) Exemption	claim – Check the box if either gra	intor or grantee is c	laiming exe	mptio	n from trans	fer tax and	evnlain	_
			J	g ene	p.c.o.		ner tax aria t	explair.	
7 DATE OF TR	ANSFER (MM-DD-YYYY	/) 9 WARNING TO BUYER IS I							
06	15 2018	8. WARNING TO BUYER-If the p front a substantial financial pen	oroperty is classified halty could be trigg	d as Farmiar Jered by dev	id, Opi elopm	en Space, Ti ient, subdiv	ee Growth, d ision, partiti	or Working Wate on or change in	er- i use.
MONTH	DAY YEAR							CLASS	
9. SPECIAL CIRC	CUMSTANCES—Were the	here any special circumstances orice paid was either more or less	10. INCOME	TAX WITHH				withhold Main	ie
than its fair mar	ket value? If yes, check	the box and explain:		☐ Sell		income tax qualified a	because: s a Maine re:	sident	
		Ш						the State Tax As	ssessor
							property is	less than \$50,0	00
11. OATH	Aware of penaltic	es as set forth by Title 36 §4641-K, we	horoby swoar or af			ire Sale			
	our knowledge and	belief, it is true, correct, and complete.	. Grantee(s) and Gra	antor(s) or th	eir au	thorized ag	nea this rett ent(s) are re	am and to the b quired to sign b	est of elow:
	Grantee WILLIA	M E. EVISON-TRUSTEE 06/1	9/2018 Grantor	ADAM			***	Date 06/19	/2018
12 DDED4555		L EVISON-TRUSTE E _{Date} 06/1	.9/2018 Grantor	r				Date 06/19	/2018
12. PREPARER	Name of Preparer	LINDA DAIGLE		Phone Nu	nber_				
	Mailing Address .	181 CENTER STREET AUBURN, ME 04210		E-Mail Add		ldaigle@h	dtitle.com		
		A A COLOUNIA, IMIL UHZ IU		Fay Numb	or				

PROCESSED ONLINE.

DLN: 1001840030263

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry Sagadahoc

DO NOT	RE-PROCES	22				^		Dat	e Recorded	06/19	9/2018	<u> </u>
	TTD			CLARATIONS				Tim	e Recorded	02:45	5:00 P	M
<u> </u>			TLE 36, M.R.S.A	A. SECTIONS	994641-4	641N	Trai	nsfer T	ax Amount	\$0.00)	
Sagadah	oc						D	ocume	ent Number	2018	R-039	38
1. County										2018		
BATH												
2. Municipalit	y/Township							POC	_	3938		
3. GRANTEE/ PURCHASER								ВОС	OK/PAGE—REC	315 I KY US	E ONLY	=
7 3 11 3 11 11 11 11 11	PINE 3a) Name (LAST)		DONN (FIRST)	A			M					
	PINE		JAMES	2			(MI) L.		3b) SSN or Fede	ral ID		
	3c) Name (LAST)		(FIRST)				上。 (MI)		3d) SSN or Fede	ral ID		
	50 STANIF	ORD STI	REET									
	3e) Mailing Address								¬			
	NEWTON] MA	02	2466	
4. GRANTOR/	3f) City								3g) State	3h) .	Zip Code	
SELLER		VOCABI	E TRUSZA		HEEM,BI	HRUB9ÇI						
	4a) Name (LAST)		(FIRST)				(MI)		4b) SSN or Fede	rai ID		
	4c) Name (LAST)		(FIRST)				(1.41)					
	77A BROO	KSIDE A					(MI)	,	4d) SSN or Feder	ral ID		
	4e) Mailing Address	KSIDE A	VENUE									
	NEWTON								MA		2460	
	4f) City								4g) St		h) Zip Cod	de
5. PROPERTY	4		10						he code numbe		001	
	5a) Map	Block	Lot	Sub-Lo	C	heck any th	at appl	y:	sold. (See instruc	tions)—»	201	
	49 MALLA	RD ROAI				No tax Multip			0.41]	
	5c) Physical Location				[Portion	of par	cel	5d) Acreage			
6. TRANSFER TA	4X 6a) Purchase	Price (If the	ransfer is a gift,	enter "0")			6a	\$0				.00
			er a value only i		d "0" in 6a) o	or] ~~ [
	if 6a) was of n	nominal valu	e)	•	•		6b	\$121	,700			.00
			Check the box if ei									
Transfer f	from Trust to In	dividual v	with no chan	ge in bene	eficial ow	nership	. Titl	e 36 4	4641-C (1	5c).		
	ANSFER (MM-DD-YYY		RNING TO BUYER	R-If the proper	ty is classified	d as Farmlaı	nd, Ope	en Space	, Tree Growth,	, or Worki	ng Water	-
06	15 2018	front	a substantial finar	ncial penalty co	ould be trigge	ered by dev	/elopm	ent, sub	division, parti			
9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were t	there any spec	ial circumstances		10. INCOME	TAX WITH	ÆLD_	Buyor(s)	not required t		CLASSIF	
in the transfer w	hich suggest that the	price paid was	either more or le	ss	TO THEOMIL		i	income ⁻	tax because:		ia iviaine	
triairits fair ffiai	ket value? If yes, check	the box and e	explain:	_					d as a Maine r		- .	
						7.7			received fron the property i			
						For	reclosu	re Sale				
11. OATH	Aware of penalt i our knowledge and	ies as set fort l d belief. it is tri	by Title 36 §464	1-K, we hereby	swear or aff	firm that we	have e	each exa	mined this ret	turn and t	to the be	st of
	Grantee ELIZAI	BETH GRII	ECO, TRUȘTE	E 06N19/201	REVOGAE	BL EONU	ISAT NVD.	APTIND	DECEMBI	ER _D 19. 2	2 06/4 19/2	iow: 2018
	Grantee			06/19/201		JAME					06/19/2	
12. PREPARER	Name of Preparer	JAMES HO				Phone Nu			72-5845			
	Mailing Address		NTER SUITE 400)		E-Mail Ad	dress _	jhopkir	nson@hablaw.	com		
		PORTLAN	D, ME 04101			Fax Numb	er					

PROCESSED DO

DLN: 1001840030260

Ω	NLINE.		MAINE RE	VENUE SER	VICES			Registry	Saga	adahoc	<u> </u>
	•	a	REAL ESTA	TETRANSF	ER TAX		Date	Recorded	06/1	.9/2018	3
	RE-PROCES	S .	ļ	LARATION			Time	Recorded	02:4	8:00 P	M
KE	TTD		TITLE 36, M.R.S.A.	SECTIONS §§	4641-4641 N	Tra:		ıx Amount			
Sagadaho	oc					i		nt Number			
1. County							ocume				39
BATH				,				Book			
2. Municipality	y/Township				. .		B00	Page			
3. GRANTEE/ PURCHASER							BOO	K/PAGE—REG	ISTRY U	SE ONLY	
TOTICIMSER	COOPER 3a) Name (LAST)		JOSEPI (FIRST)	H		E (MI))	Bb) SSN or Feder	al ID		
	COOPER 3c) Name (LAST)		SUSAN (FIRST)	ſ		E		Bd) SSN or Feder	-UD		
	1045 HIGH S	STRE					:	sa) 55N or Feder	aliD		
	BATH							1 745		4520	
	3f) City	·						ME 3g) State		4530) Zip Code	
4. GRANTOR/ SELLER	WASHINGT 4a) Name (LAST)	ON	CHARL (FIRST)	ES		В	4	b) SSN or Feder		7215 Code	
	4c) Name (LAST)		(FIRST)			(MI)	4	d) SSN or Federa	al ID		
	1 MACMILL	AN D	PRIVE	-	-						
	4e) Mailing Address							_			
	BRUNSWIC	K				-		ME	7 0	4011	
5 DD0D55	4f) City							4g) Sta	ite	4h) Zip Coo	de
5. PROPERTY	20 5a) Map	Block	096	Sub-Lot	descri	ype of propert bes the proper any that appl	ty being s o	ne code number old. (See instruct	that bes :ions)—»	202	
	1045 HIGH S	TREE		340 201		lo tax maps (Aultiple parc		0.00		7	
	5c) Physical Location				P	ortion of par	cel	5d) Acreage		_	
6. TRANSFER TA	AX 6a) Purchase Pi	rice (If t	he transfer is a gift, e	enter "0")		6а	\$232	000			.00
	6b) Fair Market	Value (enter a value only if		in 6a) or		Ψ202]]
	if 6a) was of no	minal v _	alue)			6b					.00
	6c) Exemption cl	laim – [Check the box if eit	her grantor or gra	intee is claimir	ng exemptio	n from tra	ansfer tax and	explain	i•	
7. DATE OF TRA	ANSFER (MM-DD-YYYY)	8.	. WARNING TO BUYER-	-If the property is	classified as Fa	armland, Op	en Space.	Tree Growth.	or Work	king Water	<u>-</u>
06	18 2018	fr	ont a substantial financ	cial penalty could	be triggered l	by developm	ent, subc	livision, partit	ion or c	hange in t	use.
MONTH CIPC	DAY YEAR									CLASSIF	
in the transfer w	CUMSTANCES—Were the which suggest that the pr	ice paid	was either more or less	1 0. I	NCOME TAX V	WITHHELD-	Buyer(s) i	not required to ax because:	o withh	old Maine	
than its fair mark	ket value? If yes, check th	ne box a	nd explain:]		Seller has	qualified	l as a Maine re			
							ation for 1	received from the property is			
11. OATH	Aware of penalties	as set f	orth by Title 36 §4641	-K, we hereby sw	ear or affirm th	nat we have	each exa	mined this ret	urn and	to the be	st of
	our knowledge and l	oelief, it i	is true, correct, and cor	nplete. Grantee(s)) and Grantor(s) or their au	thorized	agent(s) are re	quired	to sign be	low:
	Grantee CHARLE	א ם טי		06/19/2018	Grantor JC	USAN E C				06/19/2	
12. PREPARER		LAUR	A OVERSON	30,17,2010		ne Number			_ Date	06/19/2	2010
	Mailing Address		RKET ST	***		ne Number . ail Address		n@mssg.com			_
	.5		HESTER, NH 03101			Alumbor					

					. M	erits	: 00118568054	16 Trips	: 918 2010010033
· ·	L2RETTD*	00	REALE	STATE T DECLAR	UE SERVERNISFE	RTAX		BK- .018	PG 3948 0:40 A-M
1. County							7 2	48 B. (23948
SAGADA	HOC							Transfer	Tax of
2. Municipality	/Township	* • • • • • • • • • • • • • • • • • • •	······································				State	of Maine	Transfer Tax OUNTY MAINE
BATH							SHALL		
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSII SAGADAHO 3c) Name. LAST or BUSII 3e) Mailing Address afte 53 FRONT	CK R NESS. FIRST.	EAL ES	TATE	ASSOC	CIAT		K/PAGE—REGIS	
	an City BATH							عور State ME	04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSI INHABITA 4c) Name. LAST or BUSI 4e) Mailing Address	NTS	OF CIT	Y OF	ВАТН			· · · · · · · ·	
	55 FRONT 40 Gry BATH	STR	EET					49) State <u>M</u> E	4h) ZIP Code 04530
5. PROPERTY	5e) Map 26 5c) Physical Location 194 FRONT	Block STR		249	Sub-Lot	de Che	 b) Type of property—Entert escribes the property being seck any that apply: No tax maps exist Multiple parcels Portion of parcel 		
6.TRANSFERT	AX 6a) Purchase I	Price (Ifth	o transfor is a	a dift enter	<i></i> '''		ба		0.00
	6b) Fair Marke if 6a) was of n	t Value (e ominal va	enter a value (alue)	only if you	entered "0"		-	ransfer tax and s	100.00
Title 36 M	•			_	_		governmental ent		•
7. DATE OF TR	ANSFER (MM-DD-YYY) 0-2018 DAY YEAR	/) 8.	WARNINGTO	BUYER-If the	e property is	classified	as Farmland, Open Spac red by development, sub	e, Tree Growth, c	
9. SPECIAL CIR in the transfer v	CUMSTANCES—Were t which suggest that the rket value? If yes, check	price paid	was either moi		, 10.1	NCOMET	√ Seller has qualified	tax because: ed as a Maine res	sident
	deed to correct	deed					✓ Consideration fo Foreclosure sale	r the property is	
11. OATH	our knowledge and Grantee Uch 1	es as set for belief, it in the second of th	strue, correct,	and completed	te. Grantee(s) and Grar Grantor	offirm that we have each intor(s) or their authorized	examined this re agent(s) are re-	quired to sign below: Date 6/19/18
12. PREPARER	Grantee	Weiss DeRi		_ Date		Grantor	Phone Number 207-442-	0000	. Date
	Name of Preparer Mailing Address	PO Box 6					Phone Number	gacy-lic.com	
	Mount Names	Bath, M	E 04530				Fax Number 207-44	2-0003	



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

Merits: 0011856806817 Trips: 9182010010035



RETTD

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

36 M.R.S. §§ 4641-4641N

	, -				1	6/21/2018 09:37 044
I. COUNTY					1	018R-04064
Sagadaho					1	ansfer Tax of 1,086.80 te of Maine Transfer Tax
2. MUNICIPALITY/ Bath	TOWNSHIP				BOOK/PAGE	areus fry dse univ e
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS Kenkel, Sierra L.	•				
	3c) Name LAST or BUSINES	S, FIRST, MI				
	İ					
	3e) Mailing Address 347 Lisbon Stree	et				
	3f) City 3g) State 3h Lisbon, ME 0425	h) Zip Code iO				
4. GRANTOR/ SELLER	4a) Name LAST or BUSINES Hartford, Lindsa					
	4c) Name LAST or BUSINES Hartford, Graha					
	4e) Mailing Address					
	226 North Street	T				
	4f) City 4g) State 4f Bath ME 04530	h) Zip Code				
5. PROPERTY	5a) Map E 25	Block	Lot 165	Sub-Lot	5b) Type of property—Ente the property being sold. (S	r the code number that best describes ee instructions) —»
	5c) Physical Location				Check any that apply: ☐ No tax maps exist	5d) Acreage:
	226 North Street, E	3ath, ME 04	530		☐ Multiple parcels☐ portion of parcel	************
6, TRANSFER 1	ΓΑΧ					
	Sa) Purchase Price (If the	e transfer is a	gift, enter"0")		6a	\$247,000.00
·	6b) Fair Market Value (ei if 6a) was of nominal val	nter a value or lue)	nly if you entere	d "0" in 6a) or	f 6b	
(6c)Exemption claim - \Box	l Check the bo	x if either granto	or or grantee i	is claiming exemption	from transfer tax and explain
	Ansfer (mm-dd-yyyy) 0, 2018	or Worki		ibstantial financi	is classified as Farmland, ial penalty could be trigger	Open Space, Tree Growth, ed by development,
MONTH [DAY YEAR					☐ CLASSIFIED
	RCUMSTANCES - Were the				OME TAX WITHHELD- Bo	uyer(s) not required to withhold
tne transter whic fair market value	th suggest that the price paid ?	was emier more	or less than its	_/	er has qualified as a Main	e resident
If yes, check the	box and explain:			□ A w	aiver has been received fr	om the State Tax Assessor
					isideration for the property eclosure Sale	is less than \$50,000
11. OATH	Aware of negalties as s	set forth by Title	36 84641-K we h			examined this return and to the
TI. OAITI	best of our knowledge and	belief, it is true, o	correct, and comple	ete. Grantee(s) a	and Grantor(s) or their aut	horized agent(s) are required to
	sign below:	1 mm	Date (120	Grantor S	andoas tast	mal Date 6/20/18
	Grantee	·	Date	Grantor	196 4 Prod 10	Date 6/20/18
12. PREPARER	Name of Preparer Maine Tr	itle Services, LLC	:	Phone Nu	mber (207) 781-7400	
	Mailing Address 361 US				@mainetitleservices.com	
				Fax Numb	er (207) 781-7405	

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

PROCESSED ONLINE.

DO NOT RE-PROCESS.

DLN: 1001840030475

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/21/2018
Time Recorded	10:22:00 AM
Transfer Tax Amount	\$1,289.20
Document Number	2018r-04091
Book	
.	4001

RETTD TITLE 36, M.R.S.A. SECTIONS §§4641-4641				Time Recorded	10:22:00 P	<u> </u>
			Tran	nsfer Tax Amount	\$1,289.20	
Sagadah	oc		D	ocument Number	2018r-040	91
BATH			-	Book	2018	
2. Municipalit	u/Tournship		ŀ	Page	4091	
	y/ Township		4	BOOK/PAGE—REG		
3. GRANTEE/ PURCHASER			<u> </u>			
	FORTIN 3a) Name (LAST)	JASON	D			
		(FIRST)	(MI)	3b) SSN or Feder	al ID	
	BEIRNE 3c) Name (LAST)	ERIN (first)	C			
	357 HIGH S		(MI)	3d) SSN or Feder	al ID	
	3e) Mailing Address	JIREE1				
	BATH			ME	04520	
	3f) City			ME 3g) State	04530 3h) Zip Code	
4. GRANTOR/	MIDCOAS	T DEDEVEL ODMENTS I I C		39/3000	Jily Zip Code	
SELLER	4a) Name (LAST)	T REDEVELOPMENTS, LLC	(MI)	4h) SEN or Fodor	-UD	
	, , , , , , , , , , , , , , , , , , , ,	(113.7)	(1711)	4b) SSN or Federa	3110	
	4c) Name (LAST)	(FIRST)	(MI)	A D CON . 5		
	58 UNION			4d) SSN or Federa	al ID	
	4e) Mailing Address	511021				
	BATH			T ME	7 04520	
	4f) City			4g) Sta	04530 4h) Zip Co	de
5. PROPERTY	22	5b) Ty	pe of property	Enter the code number	that best	
	33 5a) Map	Check ar	oes the propert ny that apply	ty being sold . (See instruct v:	tions)—» 202	
		No.	o tax maps e	exist		
	357 HIGH S		lultiple parce ortion of parc			
C TDANCEED TO	5c) Physical Location		ortion of parc	5d) Acreage		***
6. TRANSFER TA	6a) Purchase	Price (If the transfer is a gift, enter "0")	6a	\$293,000		.00
	6b) Fair Marke	et Value (enter a value only if you entered "0" in 6a) or	Г Г			J 7
	if 6a) was of r	nominal value)	6b			.00
	6c) Exemption	claim – Check the box if either grantor or grantee is claiming	g exemption	from transfer tax and	explain.	
7. DATE OF TRA	NSFER (MM-DD-YYY	Y) 8. WARNING TO BUYER-If the property is classified as Far	rmland One	an Space Tree Growth	or Marking Wate	
06	20 2018	front a substantial financial penalty could be triggered by	y developme	ent, subdivision, partiti	ion or change in	use.
MONTH	DAY YEAR				CLASSII	FIED
 SPECIAL CIRC the transfer w 	UMSTANCES—Were t	there any special circumstances 10. INCOME TAX W price paid was either more or less		Buyer(s) not required to	ว withhold Maine)
han its fair mar	ket value? If yes, check			ncome tax because: qualified as a Maine re	sident	
				nas been received from		sessor
		-		tion for the property is	less than \$50,00	00
1. OATH	Aware of nenalti	jes as set forth by Title 36 \$4641 K we havehus week as the state of t	Foreclosur			
• • • •	our knowledge and	ies as set forth by Title 36 §4641-K, we hereby swear or affirm that d belief, it is true, correct, and complete. Grantee(s) and Grantor(s)	iat we nave e i) or their autl	acn examined this reti horized agent(s) are re	urn and to the beguired to sign be	≥st of ≥low:
	Grantee MIDCO		SON D FO		Date 06/21/2	
	Grantee		NN C BEI	RNE	Date 06/21/2	
2. PREPARER	Name of Preparer		ne Number_	(207) 772-5845		
	Mailing Address		ail Address _	jhopkinson@hablaw.c	om	
		PORTLAND, ME 04101 Fax N	Number			

PROCESSED ONLINE

DLN: 1001840030503

MAINE REVENUE SERVICES

Registry Sagadahoc

	RE-PROCESS	REAL ESTATE TRA		I	Date Recorded	06/21/201	8
	TTD	• DECLARAT TITLE 36, M.R.S.A. SECTION		T	ime Recorded	12:44:00	PM_
		THEE 50, W.N.S.A. SECTION	13 334041-404	Transfer	Transfer Tax Amount \$594.00		
Sagadaho	oc			Docu	ment Number	2018r-040)95
1. County				-	Book	2018	
BATH	77				,	4095	
2. Municipality 3. GRANTEE/	y/ Iownship				. BOOK/PAGE—REG		
PURCHASER	EMANG	TD CCT C					
	EVANS 3a) Name (LAST)	JESSICA (FIRST)		(MI)	3b) SSN or Feder	ral ID	
	EVANS	BLYTHE		(1411)	3b) 33N of Feder	al ID	
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Feder	al ID	
	PO BOX 413						
	3e) Mailing Address					¬	
	BELFAST	· · · · · · · · · · · · · · · · · · ·			ME	04915	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	e
SELLER	PECK 4a) Name (LAST)	MATTHEW		Α			
	, , , , , , , , , , , , , , , , , , , ,	(FIRST)		(MI)	4b) SSN or Federa	al ID	
	PECK 4c) Name (LAST)	KEVIN (FIRST)		J (MI)	10000 5.1		
		N GATEWAY SE APT 32	1	(IVII)	4d) SSN or Federa	ai ID	
	4e) Mailing Address	I GITTE WITT DE ITT 1 J2					
	MANETTA				GA	30067	
	4f) City				4g) Sta		ode
5. PROPERTY	31	51 3	5b) des	Type of property—En	ter the code number	that best tions)—» 502	$\overline{\overline{}}$
	5a) Map		Chec	k any that apply: No tax maps exist		302	<u> </u>
	3 PINE HILL I	DRIVE		Multiple parcels	0.00		
	5c) Physical Location			Portion of parcel	5d) Acreage		
6. TRANSFER TA	X 6a) Purchase Pric	e (If the transfer is a gift, enter "0")		6a \$1	35,000		00.
		alue (enter a value only if you enter	ed "0" in 6a) or	<u></u>			_
	if 6a) was of nom	·		6b			00
	6c) Exemption clai	m – Check the box if either granto	r or grantee is clain	ming exemption fror	n transfer tax and	explain.	
1 1 -	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the prop	erty is classified as	s Farmland, Open Sp	ace, Tree Growth,	or Working Wat	er-
	21 2018	front a substantial financial penalty	could be triggere	d by development, s	ubdivision, partiti		
9. SPECIAL CIRC	DAY YEAR UMSTANCES—Were there	e any special circumstances	10. INCOME TAX	X WITHHELD- Buye	r(s) not required to	CLASS	
in the transfer w	hich suggest that the pric set value? If yes, check the	e paid was either more or less		incor	ne tax because:		ie
than its fall mark	tet value: II yes, check the	box and explain:			ified as a Maine re een received from		
					for the property is		
11. OATH	A			Foreclosure Sa			
II. OAIR	our knowledge and be	s set forth by Title 36 §4641-K, we here lief, it is true, correct, and complete. Gra	by swear or affirm ntee(s) and Granto	n that we have each or(s) or their authoriz	examined this retured the return the contract of the contract	urn and to the beguired to sign b	est of
	Grantee MATTHEY	V A PECK Date 06/21/2	018 Grantor	JESSICA EVAN		Date 06/21	/2018
***************************************	Grantee KEVIN J P	Date		BLYTHE EVAN	1S	Date 06/21	/2018
12. PREPARER		AURA OVERSON	P	hone Number <u>(603</u>			
		0 MARKET ST	E-	-Mail Address <u>love</u>	erson@mssg.com		

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: 1001840030497

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/22/2018
Time Recorded	09:46:00 AM
Transfer Tax Amount	\$347.60
Document Number	2018R-04100
Book	2018
	4100

RETTD		TITLE 36	LE 36, M.R.S.A. SECTIONS §§4641-4641N			Time Recorded <u>09:46:00</u>					<u>AM</u>
C1-1-				***		Trai	nsfer Ta	ax Amou	ınt <u>5.</u>	347.60	
Sagadaho	OC	· · · · · · · · · · · · · · · · · · ·				D	ocume	nt Numb	per <u>2</u>	<u>018</u> R-04	1 100
								Bo	ok <u>2</u> 0	018	
BATH								Pa	ge 4	100	
2. Municipality	/lownship						BOO			RY USE ONL	
3. GRANTEE/ PURCHASER	YORK STR	EET PROPEI	RTY LLC (FIRST)		L	(MI)		3b) SSN or F			
	3c) Name (LAST)		(FIRST)			(MI)	'	3d) SSN or F	ederal ID)	
	188 FORES	DE ROAD									
	3e) Mailing Address							, —			
	TOPSHAM							N	1E [04086	
	3f) City							3g) St	tate	3h) Zip Coo	le
4. GRANTOR/ SELLER	LUCE 4a) Name (LAST)		KIMBERLY (FIRST)			(MI)		4b) SSN or F	ederal ID)	
	4c) Name (LAST)		(FIRST)			(MI)	L	4d) SSN or F	ederal ID)	
	112 TURNE	R FIELD WA	Υ								
	4e) Mailing Address										
	SUMMERV	ILLE							\overline{C}	29485	
	4f) City							J ∟	g) State	4h) Zip	
5. PROPERTY	21 5a) Map 37 YORK S7 5c) Physical Location	Block	115 Lot	Sub-Lot	describes Check any No 1 Mul	the proper	rty being s ly: exist els	he code nur old. (See ins	structions		2
6. TRANSFER TA	X 6a) Purchase I	Price (If the transfe	er is a gift, enter "0	" \		6а	\$79,				.00
		t Value (enter a va ominal value) ——	alue only if you en	itered "0" in 6a)		6b			and exp	olain.	.00
06 MONTH	NSFER (MM-DD-YYYY) 21 2018 DAY YEAR	front a subs	G TO BUYER-If the p tantial financial pen	alty could be tric	ggered by	developm	nent, sub	division, p	artition	or change CLAS	in use. SIFIED
in the transfer w	UMSTANCES—Were to hich suggest that the p ket value? If yes, check	orice paid was eithe	r more or less	10. INCOM	IE TAX WI	Seller has A waiver	income s qualifie has beer ation for	tax becaus d as a Mai 1 received	se: ne resid from th	vithhold Ma lent e State Tax a ss than \$50	Assessor
11. OATH	our knowledge and	es as set forth by Ti I belief, it is true, co RLY LUCE	tle 36 §4641-K, we herect, and complete. Date 06/2	Grantee(s) and $65/2018$ Grant	or YC	or their au	ıthorized	agent(s) a	are requ CTY L	ired to sign	below: 5/2018
12 DECREE	Grantee			5/2018 Grant	or					Date <u>06/2</u>	5/2018
12. PREPARER	Name of Preparer	ERIC SCHAEFF				Number.		346-3460			
	Mailing Address	45 FOREST FAL					closing	gs@dougla	istitle.co	m	
		YARMOUTH, M	ユン ひもひきひ		Fax Ni	ımber					

PROCESSED ONLINE.

BELL

3a) Name (LAST)

3c) Name (LAST)

3e) Mailing Address BATH 3f) City

NELSON

4a) Name (LAST)

4c) Name (LAST)

4e) Mailing Address **BATH** 4f) City

5c) Physical Location

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

9. SPECIAL CIRCUMSTANCES—Were there any special circumstances

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

38

5a) Map

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

22

DO NOT RE-PROCESS.

D	_	T	T	J.
п				u

Sagadahoc 1. County **BATH**

3. GRANTEE/ **PURCHASER**

4. GRANTOR/

5. PROPERTY

6. TRANSFER TAX

06

11. OATH

12. PREPARER

SELLER

2. Municipality/Township

DLN: 1001840030666

2 SCHOONER RIDGE ROAD UNIT #13

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

SSED	MAINEDE	/ENUE SERVIC		-		Registry	Sagadahoc	
NE.	1	TE TRANSFER T			Date 1	- ,	06/22/2018	 }
PROCESS.	DEC	LARATION					01:29:00 P	•
D	TITLE 36, M.R.S.A.	SECTIONS §§4641	-4641N	Trar			\$816.20	141
				İ			2018r-0413	26
				"	ocumen		20181-041.)
							4136	
ship					воок	•	ISTRY USE ONLY	
rr r	DECED							
ELL lame (LAST)	PETER (FIRST)			E (MI)) SSN or Fede	ral ID	
							-	
ame (LAST)	(FIRST)	WT 110		(MI)	3d) SSN or Feder	ral ID	
SCHOONER RI Nailing Address	DGE ROAD UN	111 #13		_				
ATH						ME	04530	
ity						3g) State	3h) Zip Code	
ELSON	BONNII	3		R				
ame (LAST)	(FIRST)			(MI)	4b) SSN or Feder	ral ID	
ame (LAST)	(FIRST)			(MI)) SSN or Feder	ol ID	
	DGE ROAD UN	IT #13]	70) JON OI TEGE	aiiD	
ailing Address								
ATH						ME	04530	
ty			5b) Tv	oe of propert	y Entor the	4g) Sta code number		de
Map Bloc	k 108	13 Sub-Lot	describ Check ar		ty being sol y:	d . (See instruc		
SCHOONER RI	DGE ROAD UN	TT #13	М	ultiple parc	els	0.00		
nysical Location			- П _{Ро}	rtion of par	cel	id) Acreage		
6a) Purchase Price (If	the transfer is a gift, e	nter "0")		6a	\$185,	500		.00
6b) Fair Market Value if 6a) was of nominal	(enter a value only if	you entered "0" in 6a	a) or	6b				.00
•	,		ia alaimain	l		-6] .00
oc) Exemption claim –	Check the box if eith	ier grantor or grantee	is ciaimin	g exemptio	n from trai	isier tax and	i expiain.	
2018 YEAR	8. WARNING TO BUYER— front a substantial financ	ial penalty could be tr	iggered b	y developm	nent, subdi	vision, parti	tion or change in CLASSI	use. FIED
ANCES—Were there any aggest that the price pai	special circumstances d was either more or less	10. INCO I	ME TAX W	ITHHELD-		ot required t x because:	to withhold Maine	2
ue? If yes, check the box	and explain:		Σ			as a Maine r		
			-		ation for th		n the State Tax Ass is less than \$50,00	
ware of penalties as set	forth by Title 36 §4641	-K, we hereby swear or	r affirm th	at we have	each exan	nined this re	turn and to the be	est of
tee <u>BONNIE</u> R NE	t is true, correct, and con ${ m ELSON}$ Date	06/05/0010) or their au TER E B		gent(s) are r	equired to sign be Date <u>06/25/</u>	
tee	2410	06/25/2018 Gran					Date 06/25/	2018
me of PreparerJAMI	ES HOPKINSON		Phor	e Number.	(207) 77	2-5845		

Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm the our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grantor(s) 06/25/2018 **BONNIE R NELSON** Grantee Grantor 06/25/2018 Grantee Date Grantor JAMES HOPKINSON Name of Preparer Phor 6 CITY CENTER SUITE 400 E-Mail Address <u>jhopkinson@hablaw.com</u> Mailing Address PORTLAND, ME 04101 http://www.maine.gov/revenue/propertytax/transfertax.htm

PROCESSED ONLINE. DO NOT RE-PROCESS.

DLN: _1001840030714

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/25/2018
Time Recorded	09:45:00 AM
Гransfer Tax Amount	\$589.60
Document Number	2018r-04181
Book	2018
,	41.01

_ RE	TTD	TITLE 36, M.R.S.A. SECTION	NS §§4641-46	41N _		-	Φ500.60	UVI
Canadaha				Tran	ister Tax A	Amount _	\$589.60	
Sagadaho	<u> </u>			D	ocument N	Number _	2018r-0418	81
						Book	2018	
BATH						Page	4181	
2. Municipality	y/Township				BOOK/PA		STRY USE ONLY	_
3. GRANTEE/ PURCHASER								
	STEVENS 3a) Name (LAST)	LINDA		(1.41)				
	Sa) Name (LAST)	(FIRST)		(MI)	36) 5	SN or Federa	מווו	
	3c) Name (LAST)	(FIRST)		(MI)	34) 5	SN or Federa	l ID	
	14 VIBURN	UM CIRCLE			<i>3</i> u , <i>3</i>	SIV OF FEDERA	שוווו	
	3e) Mailing Address							
	PLAINFIEL	D				CT	06374	
	3f) City					3g) State	3h) Zip Code	
4. GRANTOR/ SELLER		DEBRAH A PROVENCHE	R					
	4a) Name (LAST)	(FIRST)		(MI)	4b) S	SN or Federa	IID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) S	SN or Federa	IID	
	PO BOX 84							
	4e) Mailing Address							
	WOOLWIC	Ξ				ME	04579	
	4f) City					4g) Stat	te 4h) Zip Co	de
5. PROPERTY	31	051 1:	3	b) Type of property describes the proper				
	5a) Map			eck any that appl	y:		202	
	13 PINE HIL	L DRIVE		No tax maps of Multiple parce		0.10		
	5c) Physical Location			Portion of par	cel 🗀	Acreage		
6. TRANSFER TA	AX 6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a	\$134,00)()		00.
		t Value (enter a value only if you enter	red "0" in 6a) or	r]]
	if 6a) was of n	ominal value)		6b				00.
	6c) Exemption	claim – Check the box if either granto	r or grantee is cla	aiming exemptio	n from transf	er tax and	explain.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY	7) 8. WARNING TO BUYER-If the prop	perty is classified	as Farmland, Op	en Space. Tre	e Growth.	or Working Wate	-r-
06	22 2018	front a substantial financial penalty					on or change in	use.
MONTH	DAY YEAR						CLASSI	
		here any special circumstances orice paid was either more or less	10. INCOMET	TAX WITHHELD-	Buyer(s) not income tax b		withhold Maine	j
	ket value? If yes, check			$\overline{\mathrm{X}}$ Seller has			sident	
				<u> </u>			the State Tax As	
				Foreclosu		property is	less than \$50,00)0
11. OATH	Aware of penalti	es as set forth by Title 36 §4641-K, we here	eby swear or affi	irm that we have	each examin	ed this ret	urn and to the b	est of
	our knowledge and	l belief, it is true, correct, and complete. Gra	antee(s) and Grar	ntor(s) or their au	thorized age	nt(s) are re	quired to sign be	elow:
		E OF DEBRAH A PRONE NO 106/25/2		LINDA STI	EVENS		Date 06/25/	
12. PREPARER	Grantee	Dorothy Jost	2018 Grantor		(207) 727	1000	_ Date06/25/	2018
· =· i ivei Allell	Name of Preparer	59 PLEASANT STREET	***	Phone Number	(207) 725-4 dorothy@c		ritle com	
	Mailing Address .	BRUNSWICK, ME 04011		E-Mail Address Fax Number	Goromywe	annoch fallel	auc.com	

PROCESSED D

DLN: _1001840031189

$O_{\mathbf{N}}$	ILINE.	MAINE REVENU	E SERVICES		Re	egistry 🗋	Sagadahoc	
		REAL ESTATE TRA	ANSFER TAX		Date Rec	corded (06/28/2018	}
	RE-PROCESS	DECEARA			Time Rec	corded (03:25:00 P	M
KE	<u> TTD</u>	TITLE 36, M.R.S.A. SECTIO	NS §§4641-4641N	Trans	sfer Tax A	mount S	\$660.00	
Sagadaho	c						2018r-0428	32
1. County						_		<u>, </u>
BATH						Book 2		
2. Municipality	/Township				DOOK (DA	Page _	-	_
3. GRANTEE/					BOOK/PA	GE—REGIS	TRY USE ONLY	
PURCHASER	NANNEN, JR 3a) Name (LAST)	. HOWARD		$\mathbf{W}_{ ext{(MI)}}$	3b) SS	N or Federal	ID	
	NANNEN 3c) Name (LAST)	JANET (FIRST)		T.	3d) SS	N or Federal	ID	
	13 CHAMBEI	RLAIN AVENUE						
	BRUNSWICK 3f) City					ME 3g) State	04011 3h) Zip Code	
4. GRANTOR/ SELLER	THE SALVAT	ΓΙΟΝ ARMY (FIRST)		(MI)	4b) SS	N or Federal	ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) SS	N or Federal	ID	
	440 WEST NY	ACK ROAD			,			
	4e) Mailing Address							
	WEST NYAC	K				NY	10994	
	4f) City					4g) State	4h) Zip Co	de
5. PROPERTY	14 5a) Map	Block Lot	describe	pe of property- es the property ny that apply	y being sold . (:			
	73 WINSHIP S		No.	tax maps ex ultiple parce		0.00		
	5c) Physical Location	51 KEE 1		rtion of parc	el 🖳	Acreage		
5. TRANSFER TA	X 63\ Purchasa Pri	ce (If the transfer is a gift, enter "0"	'	62	\$150,00			.00
		/alue (enter a value only if you ent		6a [\$150,00	<u> </u>] .00
	if 6a) was of non		ered o in oa) or	6b				.00
	6c) Exemption cla	im – Check the box if either gran	tor or grantee is claiming	g exemption	from transfe	er tax and e	xplain.	_
7 DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the pr	operty is classified as Fa	rmland One	n Snaco Tro	a Growth o	r Working Wate	r_
06 MONTH	26 2018 DAY YEAR	front a substantial financial pena	' '					use.
. SPECIAL CIRC	UMSTANCES—Were the	re any special circumstances	10. INCOME TAX W				withhold Maine	9
	hich suggest that the pri- ket value? If yes, check the	ce paid was either more or less e box and explain:	Б	i Seller has	ncome tax b qualified as		ident	
	·			A waiver h Considera	as been rece tion for the	eived from 1	the State Tax As less than \$50,00	
4.04711				Foreclosu				
1. OATH		as set forth by Title 36 §4641-K, we helief, it is true, correct, and complete.						
		LVATION ARMY Date 06/28	3/2018 Grantor <u>HC</u>	OWARD V	W NANNI		Date 06/28/	2018
	Grantee	Date		NET T. N			Date 06/28/	2018
2. PREPARER		MELISSA PERKINS		ne Number _				
	Manning Address —	75 MARKET STREET POPTI AND ME 04101			melissa@tr	eworgy-bal	dacci.com	
		PORTLAND, ME 04101	Fax N	Number _				

Fax Number

Merits: 0011856807028 Trips: 9182010010057

12RETTD RETTD	(
1. County	
SAGADAHOC	
2. Municipality/Township	

MAINE REVENUE SERVICES

-	ZRETTD*	00		TRANSFER TA	х	,	3 <u>k</u>	<u>PG</u> 4283)
	ITD			4641-4641N		. (018	7200
1. County			****			6 181		3716 T.M
SAGADA	HOC							14283
2. Municipality	Township					Stale	Transfer	Tax of Constant Tax
BATH						SAGAD	AHOC CC	UNTY MAINE
3. GRANTEE/						BOOK/	PageRegist	'RY USE ONLY
PURCHASER	3a) Name LAST or BUSIN							
	DAUPHIN,							
	3e) Mailing Address after 183 EAST	RIVE	this property R ROAD			'		
	WHITEFIE	LD					ME	04341
4. GRANTOR/ SELLER	4a) Name, LAST or BUSII PINKHAM,	NESS, FIRST, I TRAC				7		
	4c) Name LAST or BUSI	NESS. FIRST. I	di					
	4e) Mailing Address 5 NICHOL	S STI	EET					J
	46) City BATH						4g) State ME	4h) ZIP Code 04530
!	34 5c) Physical Location 3 NICHOLS	STR	28		Check any that	parcels	id) Acreage	nsj—»
6. TRANSFER TA	X 6a) Purchase I	Price (If the	e transfer is a gift, en	ter"()")	<u> </u>	6a		0.0
		t Value (e	ater a value only if yo		or	6b		. 0.0
	6c) Exemption	claim – 🏹	Check the box if eithe	er grantor or grantee is	claiming exer	nption from tra	nsfer tax and e	xplain.
Corrective	Deed - serves or							
	NSFER (MM-DD-YYYY) 3-2018 DAY YEAR	() 8.\ fro	VARNING TO BUYER-IF nt a substantial financia	the property is classifi is penalty could be trig	ied as Farmlan ggered by deve	d, Open Space, elopment, subd	Tree Growth, o	or Working Water- on or change in use. CLASSIFIED
9. SPECIAL CIRC in the transfer v	CUMSTANCES—Were to which suggest that the	price paid v	vas either more or less	10. INCOM	,	income ta	x because:	withhold Maine
than its fair mai	ket value? If yes, check	the box an	o exbiaiu:	* •		ler has qualified raiver has been i		sident the State Tax Assesso
						nsideration for t eclosure sale	he property is	less than \$50,000
11.OATH	Aware of penalti our knowledge and Grantee	d belief (it is		1-K, we hereby swear oplete. Grantee(s) and G	arantor(s) or the	eir authorized a	gent(s) are red	eturn and to the best quired to sign below: Date GAS/IS Date
12. PREPARER	Name of Preparer	Jenny Burch			_ Phone Nu			AAD
	Mailing Address	23 Centre			_ Email Add	007.449	ch207@gmail.d	2011
Barr 124		Bath, Mi	: U453U www.maine.gov/rever	nue/propertytay/trap	Fax Numb sfertax/transf			

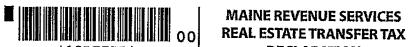
Merits: 0011856806227 Trips: 9182010010055

	2rettd*	00 REAL ESTATE DECLA	NUE SERVICES TRANSFER TAX RATION 4641-4641N		2018 —	- 4284
1. County	110	30 14.11.3. 33	4041 404111	- 6	18 3	3:46 P·M
SAGADA	HOC]	2018A-C	4284
2. Municipality	/Township			\dashv	Transfer	Tax of
BATH	,			-	State of Maine	TRANSTER TAX
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINES [PINKHAM ,	s, first, mi TRACY			BOOK/PAGE—REGIST	TRY USE ONLY
	3c) Name, LAST, or BUSINES 3c) Mailling Address after p [5 NICHOLS 3f) City BATH	urchase of this property			ogisiātē ME	04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINES DAUPHIN, 4c) Name, LAST or BUSINES DAUPHIN,	HAROLD SS.EIRST.MI			14	·
	4e) Mailing Address 183 EAST 4f) City WHITEFIEL	RIVER ROAD			49) State	4h) ZIP Code 0 4 3 4 1
5. PROPERTY	5a) Map 34 5c) Physical Location NICHOLS	STREET			exist 5d) Acreage	
6.TRANSFERT	AX 6a) Purchase Pri	ce (If the transfer is a gift, ent	er"()")		<u>. ·</u>	00. 0
		/alue (enter a value only if yo		Į	9/8	00.0
	6c) Exemption cla	$\lim_{n\to\infty} - \sqrt{n}$ Check the box if either	r grantor or grantee is cl	ں aiming exemptio	n from transfer tax and e	explain.
Confirmato	ry Deed - serves o	nly to correct the leg	al description of	the parcel	previously conve	yed.
7. DATE OF TR	ANSFER (MM-DD-YYYY) 3-2018	8. WARNING TO BUYER-IF front a substantial financia	the property is classified	i as Farmland, Op	en Space, Tree Growth, o	or Working Water-
9. SPECIAL CIR	CUMSTANCES—Were the	re any special circumstances ce paid was either more or less e box and explain:	10. INCOME		Buyer(s) not required to income tax because: s qualified as a Maine re	
					has been received from ration for the property is ure sale	
11. OATH	Aware of penalties our knowledge and b Grantee 11641	Date S	plete. Grantee(s) and Gra	affirm that we ha	ve each examined this repthorized agent(s) are re	quired to sign below: Date
12. PREPARER	Grantee K.C.	nny Burch	6-18-18 Grantor		207.443.3333	Date 6-25-18
i.a. Preparek	Name of Preparer	3 Centre Street		Phone Number.	jennyburch207@gmail.	com
	Mailing Address	Bath, ME 04530	-	Émail Address Fax Number	207.443.3333	

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

Fax Number

Merits: 0011856806429 Trips: 9182010010059



*	*12RETTD* RETTD 1. County		DECLARATION 36 M.R.S. §§ 4641-464	1N			ac ino (004 0		L í
1. County							06/28/2018 2018R-0		
SAGADA	HOC						Transfer Tax o		
2. Municipality	/Township						tate of Maine 1 AGADAHOC CO		•
BATH			***************************************			1 .	1018 —		
3. GRANTEE/							PAGE—REGISTI		
PURCHASER	3a) Name LAST or BUSIN	JESS, FIRST, MI DAVID T		L			-	-	
	BUXTON, V	VIRGINIA							
	3e) Mailing Address afte 23 CENTRE	courchase of this prop ESTREET	perty						
	30 City BATH						ME	045	30
4. GRANTOR/ SELLER	4a) Name, LAST or BUSIN MCCONNEL	L, CATHE	RINE A						
	4d Name LAST or BUSIN	KAREN J							
	4e) Mailing Address 1284 HIGH	TSTREET					1		
	40 City BATH						4g) State		ZIP Code
	DATII						ME	045	30
5. PROPERTY	5a) Map 2 6 5c) Physical Location 2 3 WINTER	STREET	Lot Sub-Lot 152	describe Check any No	e of property s the property that apply tax maps e ltiple parce tion of parc	y being sol : xist 5 ls	code number that d. (See Instruction d) Acreage	(i)—»	
6. TRANSFER TA	X 6a) Purchase Pi	rice (If the transfe	r is a gift, enter "0")		6a	,	3(000	00.00
	6b) Fair Market if 6a) was of no	: Value (enter a va ominai value)	lue only if you entered "0"	'in 6a) or	6b				.00
	6c) Exemption c	laim – 🔲 Check t	he box if either grantor or gra	ntee is claiming	exemption	from tran	sfer tax and ex	lain.	
06-27 MONTH	NSFER (MM-DD-YYYY) -2018 DAY YEAR	front a subst	TO BUYER-If the property is tantial financial penalty could	classified as Farr be triggered by	mland, Ope developme	n Space, T ent, subdi	ree Growth, or vision, partition	or chang	Water- ge in use. ASSIFIED
in the transfer w	UMSTANCES—Were the chich suggest that the po ket value? If yes, check t	rice paid was either	more or less	NCOMETAX WI [√]	İ	ncome tax	ot required to w k because: as a Maine resid		Maine
						tion for th	eceived from the		
11.OATH	Aware of penaltie our knowledge and	s as set forth by 36 belief, it is true, corr	M.R.S. § 4641-K, we hereby rect, and complete. Grantee(s	swear or affirm to and Grantor(s)	hat we have or their app	e each exa horjzed ag	amined this retu gent(s) argrequ	rn and t ired to si	o the best of gp below:
	Grantee Grantee	Sile	Date 6/27/18 Date 6/27/18	Grantor Carlo	me_11	clon	nell i	ate 6	127/18 121/18
12. PREPARER	Name of Preparer	enny Burch			Number 2	07.443.333			
=	Mailing Address _	23 Centre Street				ennyburci	1207@gmail.coi	n	
		Bath, ME 04530		Fax No	umber _	207.443.3	333		

Rev. 12/15

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

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DLN: 1001840031371

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry	Sagadahoc
Date Recorded	06/29/2018
Time Recorded	10:39:00 AM
ransfer Tax Amount	\$572.00
Document Number	2018r-04293
Book	2018
_	4202

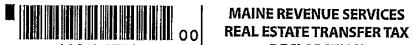
RE1	ΓTD	TITLE 36, M.R	R.S.A. SECTIONS §§	4641-46	41N		Recorded			<u>M</u>
0 11					Tra	nsfer Ta	x Amount	\$572.	.00	
Sagadahoo	c				Γ	ocume	nt Number	20181	<u>:-0429</u>	3
1. County				1			Book	2018		
BATH	<u>.</u>						Page	4293		
2. Municipality/	Township				_	воо	K/PAGE—REGI		E ONLY	
3. GRANTEE/ PURCHASER					<u> </u>		•			
	BISSON 3a) Name (LAST)	JUL (FIRST)	LIETTE		L.		3b) SSN or Feder	al ID		
	Sa) Haine (ENST)	(11131)	,		(IVII	´ [56) 551 4 61 1 eder	und		
	3c) Name (LAST)	(FIRST)			(MI)	·	3d) SSN or Feder	al ID		
	2 MAPLE STR	EET								
	3e) Mailing Address						, <u> </u>			
	BATH						ME	04	1530	
	3f) City					-	3g) State	3h) .	Zip Code	_
4. GRANTOR/ SELLER	WEST	CHI	RISTOPHER		J.					
	4a) Name (LAST)	(FIRST)			(MI	, , ,	4b) SSN or Feder	al ID		
	WEST		LISSA		E.	L L				
	4c) Name (LAST)	(FIRST)			(MI		4d) SSN or Feder	al ID		
	2 MAPLE STR 4e) Mailing Address	EEI								
	BATH			· •••			ME		530	\neg
	4f) City		*				4g) Sta		h) Zip Cod	le
5. PROPERTY	25		4		5b) Type of proper				220	$\overline{}$
	25 5a) Map	Block 29	ot Sub-Lot		describes the proper seck any that app		ola. (See Instruc	tions)»	220	
	2 MAPLE STR	DET			No tax maps Multiple pare		0.00		7	
	5c) Physical Location			[Portion of pa		5d) Acreage		J	
6. TRANSFER TAX	Y	e (If the transfer is a	aift antar "O"		62	\$130				.00
)":n 6a\ a	6a -	\$130	,000			.00
	if 6a) was of nom		only if you entered "() in 6a) o	r 6b					.00
	6c) Exemption clai	m – Check the bo	ox if either grantor or g	rantee is cl	aiming exemption	on from t	ransfer tax and	l explain		
	oc, Exemplion clar		on a citater granton or g	idirec is ei	anning exemption		ansier (ax ano	скрини		
7 DATE OF TRA	NSFER (MM-DD-YYYY)	9 WADNING TO D	BUYER-if the property	is slassifies	l ac Earmland O	on Cnac	Troo Crowth	or Worki	ina Mata	
	28 2018		I financial penalty cou							
	DAY YEAR								CLASSIF	FIED
	UMSTANCES—Were there the price that			. INCOME	TAX WITHHELD		not required tax because:	to withho	old Maine	
	et value? If yes, check the					ıs qualifie	ed as a Maine r			
							n received from the property			
					_	ure Sale	the property	15 1655 (116	111 \$30,00	U
11. OATH			§4641-K, we hereby s							
	our knowledge and be	lief, it is true, correct, a PHER J. WEST	and complete. Grantee $_{ m Date}$ $\frac{07/02/2018}{}$		intor(s) or their a JULIETTE				o sign be: 07/02/2	
	Grantee MELISSA	*****	Date 07/02/2018	Grantor Grantor		٠٠. ١٠١٥	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		07/02/2	
12. PREPARER	Grance	MELISSA PERKINS		Ciditol	Phone Number	(207)	553-2590	_ Date ,		=
	Mailing Address	'5 MARKET STREET			E-Mail Address	meliss	a@treworgy-b	aldacci.co	om	

PROCESSED

DLN: 1001840031293

		MAINE REVENUE SERV	ICES	Ī		Registry	Sagadah	oc	
	ILINE.	REAL ESTATE TRANSFER	RTAX		Date I	Recorded	06/29/20)18	
	RE-PROCESS.	DECLARATION			Time I	Recorded	10:43:00) AM	
RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§46	41-4641N	I	sfer Tax	Amount	\$1,254.0	<u></u>)0	
Sagadaho	c						2018r-04		
1. County					o cum cm	Book		1275	_
BATH						,			
2. Municipality	/Township			_	BOOK		4295		
3. GRANTEE/					BOOK	PAGE—REG	ISTRY USE ON	LY	=
PURCHASER	MJS REALTY	LLC			L				
	3a) Name (LAST)	(FIRST)		(MI)	3b) SSN or Feder	al ID		ī
	3c) Name (LAST)	(FIRST)		(MI)) SSN or Feder	aLID		لـ
	22 NOBLE LAN				50) JSN OF FEGE	arib		
	3e) Mailing Address								
	PHIPPSBURG					ME	0456	2	
4 CDANITOD/	3f) City					3g) State	3h) Zip C	ode	=
4. GRANTOR/ SELLER		K REAL ESTATE ASSOCIATI	ON						
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Feder	al ID		7
	4c) Name (LAST)	(FIRST)		(MI)) SSN or Feder	TO LID		┙
	53 FRONT STR			7	40) 33N OI FEGE	arib		
	4e) Mailing Address								
	BATH					ME	0453	0	
	4f) City					4g) Sta		p Code	
5. PROPERTY	27	248		ype of property bes the proper			that best	08	ī
		Block Lot Sub-Lot	— Check a	ny that appl	ý:				L
	168-174 FRON	r street	, –	lo tax maps e Aultiple parce		0.18			
	5c) Physical Location		<u> X</u> Po	ortion of par	cel	5d) Acreage			
6. TRANSFER TA	XX 6a) Purchase Price	(If the transfer is a gift, enter "0")		6a	\$285,	000		0.	0
		lue (enter a value only if you entered "0" ir	n 6a) or	[= _	_
	if 6a) was of nomi			6b				0	D
	6c) Exemption clain	n – Check the box if either grantor or grant	tee is claimir	ng exemption	n from tra	nsfer tax and	l explain.		
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNING TO BUYER-If the property is cl							_
06	29 2018	front a substantial financial penalty could b	e triggered l	by developm	ient, subd	ivision, parti		e in use. ASSIFIED	
MONTH 9 SPECIAL CIRC	DAY YEAR CUMSTANCES—Were there	any special circumstances 10. IN	COME TAX V	WITHHELD-	Buver(s) r	ot required t	to withhold <i>N</i>		_
in the transfer w	hich suggest that the price	paid was either more or less	r		income ta	x because:		idii id	
than its fair mar	ket value? If yes, check the I	box and explain:				as a Maine r received fror	esident n the State Ta	x Assessoi	,
				⊢			is less than \$5		
11 01711				Foreclosu					_
11. OATH		s set forth by Title 36 §4641-K, we hereby swea ief, it is true, correct, and complete. Grantee(s) a							
		HOCK REAL ESTATE ASSOCIATIO		MJS REAL		-	Date 07	/02/2018	_
	Grantee		Frantor				Date07/	/02/2018	_
12. PREPARER	46	TODDARD L. SMITH		one Number					
	manning madress ——	PLEASANT STREET RUNSWICK, ME 04011		Nail Address	Lisa@m	ainestatelaw	.com		
	<u></u> D.	1. C. 10 11 1CIX, 111D VIVII	гах	: Number					

Merits: 0011856807535 Trips: 9182010010071



	12RETTD*		DECLARATION		1		_
RE	TTD	- 1	TITLE 36, M.R.S.A. SECTIONS §§4641	-4641N	609	118	1:12 HM
1. County		1			200	1978	2435
SAGADA	HOC					Transfer	1:12 P.M 04325 Tax of 0
2. Municipality	/Township				a tate	af Maine	Transfer Tax
	······································			,	8AGA	DANGE CO	OUNTY MAINE
BATH	7* · · · · · · · · · · · · · · · · · ·			!			-4325
3. GRANTEE/ PURCHASER					BOOF	/PAGE—REGIS	TRY USE ONLY
TORCHESEN	3a) Name LAST of BU DAVIS,	SINESS, FIRST	M				
	3c) Name, LAST or BU				· · · · · · · · · · · · · · · · · · ·		
	TCT TCT TEN TEN TO TO TO TO TO TO TO TO TO TO TO TO TO	ا دیایا "ودعیران					
	Jet Mailing Address				i		
	19 TOWEI	R CIR	CLE				
	BATH	· 				ME ME	04530
4. GRANTOR/	4a) Name, LAST or BU	SINESS, FIRST	MI				
SELLER	DAVIS, 1	MICHA	EL				
	4c) Name LAST or BU	SJNESS.FIRST	ML				
	L				t ;		
	4e) Mailing Address						
	135 CON	ANT A	VENUE				i
	4f) City		T-47 - 140- to			49) State	
	AUBURN					ME	04210
5. PROPERTY	5a) Map	Block	Lot Sub-Lot	5b) Type	e of property—Enter th	e code number th	at best
	19,		108	describe	s the property being so y that apply:	ld. (See instructio	ns)-> 202
	Ed Bhusiani I acation					5d) Acreage	
í	5c) Physical Location 19 TOWER	CIRC	TE	Mu	Itiple parcels		0 26
	TO TOWER	CINC	LIM	Por	tion of parcel		0.20
6. TRANSFER TA	X 6a) Purchase	Price (if th	e transfer is a gift, enter "0")		6a	•	00.0
			nter a value only if you entered "0" in 6a) or			
	if 6a) was of			• • •	6b		00.0 0
	6c) Exemption	claim - 🗸	Check the box if either grantor or grantee i	s claiming	exemption from tra	nsfer tax and ex	«plain.
Title 36 M.	R.S. \$4641-C(4)	: Deed b	etween divorcing spouses withou	t consi	deration	•	
	NSFER (MM-DD-YY)		WARNING TO BUYER-If the property is classi	* * *******	- 100 M7 and Fall 2000 1	Tree Growth, or	Working Water
6/18	118	fro	ont a substantial financial penalty could be tri	ggered by	development, subd	lvision, partitio	n o <u>r c</u> hange in use.
MONTH	DAY YEAR						CLASSIFIED
9. SPECIAL CIRC in the transfer w	UMSTANCES—Were	there any sp	pecial circumstances 10. INCOM was either more or less	METAX WI	THHELD-Buyer(s) n	ot required to a	withhold Maine
than its fair mark	et value? If yes, chec	k the box an	d explain:		Seller has qualified		dent
Conveyance	serves only to	release	a lien arising in Grantor	1			ne State Tax Assessor
_	under the term		-	√ !	Consideration for the	he property is i	ess than \$50,000
11.OATH	Aumro of navel	·	The Total Control of the Total	<u></u> <u>i</u>	Foreclosure Sale		
	our knowledge an	d belief, it is	orth by Title 36 §4641-K, we hereby swear or true, correct, and complete. Grantee(s) and t	amrm that Grantor(s) (t we nave each exan or their authorized a	ninea this retur gent(s) are rea	n and to the best of uired to sign below:
	Grantee		Date Grant		usual 14. E	20.7	Date 6/18/18
	Grantee		Date Gran	tor			Date
12. PREPARER	Name of Preparer	Jenny Burch		Phone	Number 207,442,000	90	
1	Mailing Address	P.O. Box 6		E-Mail	Address jb@legac		
5			aine 04530-0662	Fax Nu		0003	
		nttp://	www.maine.gov/revenue/propertytax/tran	stertax/tra	nsfertax.htm		

PROCESSED DLN: 1001840031449 D

ONLINE.		MAINE REVE	NUE SERVICES		Registry	Sagadanoc		
			TRANSFER TAX		Date Recorded	06/29/2018		
	RE-PROCESS	S. DECLA	ARATION			01:16:00 PM		
RE'	TTD	TITLE 36, M.R.S.A. SE	CTIONS §§4641-4641N	Trans	fer Tax Amount			
Sagadaho	oc				cument Number)6	
1. County							.0	
BATH]		2018		
2. Municipality	/Township				ū	4326		
B. GRANTEE/					BOOK/PAGE—REC	GISTRY USE ONLY		
PURCHASER	THE BATH A	AREA FOOD BANK		(MI)	3b) SSN or Fede	eral ID		
	3c) Name (LAST)	(FIRST)		(MI)	3d) SSN or Fede	eral ID		
	P.O. BOX 65							
	3e) Mailing Address							
	BATH				ME			
4. GRANTOR/	3f) City				3g) State	3h) Zip Code		
SELLER	COLUMBIA 4a) Name (LAST)	N CLUB INC. OF BAT	H, MAINE	(MI)	4b) SSN or Fede	erai ID		
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Fede	eral ID		
	807 MIDDLE	E STREET						
	4e) Mailing Address							
	BATH				ME	04530		
	4f) City				4g) S	tate 4h) Zip Co	de	
5. PROPERTY	27	064 000	describ	es the property	—Enter the code number being sold . (See instru			
	5a) Map	Block Lot	Sub-Lot	ny that apply: o tax maps ex		<u>_</u>		
	807 MIDDLE	E STREET, BATH, ME	04530	ultiple parcel ortion of parce	0.24			
	5c) Physical Location			Titori oi parce	5d) Acreage			
5. TRANSFER TA	6a) Purchase P	rice (If the transfer is a gift, ent	er "0")	6а	\$225,000		.00	
		t Value (enter a value only if yo	u entered "0" in 6a) or	_ ا			.00	
	if 6a) was of no			6b [_] .00	
	6c) Exemption o	claim – Check the box if either	grantor or grantee is claimin	ig exemption	from transfer tax an	d explain.		
DATE OF TRA	ANSFER (MM-DD-YYYY		the property is classified as Fa					
06	29 2018	front a substantial financial	l penalty could be triggered b	by developme	ent, subdivision, part	tition or change in CLASSI		
MONTH CIP	DAY YEAR	nere any special circumstances	10 INCOMETAVY	VITUUEI D D	Buyer(s) not required			
		orice paid was either more or less	TO. INCOME TAX V		ncome tax because:	i to withhold Main	e	
han its fair mar	ket value? If yes, check t	the box and explain:		A waiver h	qualified as a Maine las been received fro tion for the property re Sale	m the State Tax As		
1. OATH		es as set forth by Title 36 §4641-K,						
	COLLIN	l belief, it is true, correct, and comp						
		MBIAN CLUB INC. OF BAC	27/02/2010	прриц	AREA FOOD I	Date 07/02/		
2. PREPARER	Grantee	MICHAEL MALLOY		na Numbar	(207) 312-9239	Date		
are the cital	Name of Preparer _	178 COURT STREET		ne Number _ ail Address _	msm@malloyfirmn	naine.com		
	Mailing Address .	AUBURN, ME 04210		Number _				

Merits: 0011856807636 Trips: 9182010010073

18



12RETTD

RETTD

MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

36 M.R.S. §§ 4641-4641N

- Nam				9	06/29/2018 02:13 PM					
1. COUNTY					2018 04330					
Sagadah				. Transfer Tax of 594.00						
2. MUNICIPALIT Bath	Y/TOWNSHIP			State of Maine Transfer Tax BOOK/PAGEADAEOISTRANTSEMONIE/						
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS Erlebach, Joshu				·					
	3c) Name LAST or BUSINES									
	,									
	36 Webber Aver 36 Webber Aver 36 City 39 State 31 Bath, ME 04530	IUC) Zip Code								
4. GRANTOR/ SELLER	4a) Name LAST or BUSINES	S, FIRST, MI			<u></u>					
OLLLIN	Nye, Richard A. 40) Name LAST or BUSINES	e EIDET IN								
	s	3, FINO 1, MII								
	4e) Mailing Address 9196 L.a Stella A 4f) City 4g) State 4h Fountain Valley () Zîp Code								
5. PROPERTY	5a) Map E 43	lock Lot 030		5b) Type of property—Ent the property being sold. (er the code number that best describe See instructions) —»					
	5c) Physical Location			Check any that apply:	5d) Acreage:					
	36 Webber Avenue	, Bath, ME 04530		☐ Multiple parcels☐ portion of parcel	•					
6. TRANSFER		transfer is a gift, enter"0")			A407-000-00					
		ter a value only if you enter	rad IIOII in Rak ee	ба	\$135,000.00					
	if 6a) was of nominal valu	ie)	-	6b						
	6c) Exemption claim - □	Check the box if either grar	itor or grantee is	claiming exemption	n from transfer tax and explain					
June 2	ANSFER (MM-DD-YYYY) 28, 2018 DAY YEAR	8. WARNING TO BUYE or Working Waterfront a subdivision, partition or cl	substantiai financial	classified as Farmland penalty could be trigge	, Open Space, Tree Growth, red by development,					
9. SPECIAL CIP	RCUMSTANCES - Were then	any special circumstances in	10. INCOM	IE TAX WITHHELD- B	uyer(s) not required to withhold					
tne transter whic fair market value	on suggest that the price paid to 1?	vas either more or less than its	Maine	income tax because:						
	box and explain:		∐ Seller ∏ A vesi	has qualified as a Main	e resident rom the State Tax Assessor					
			L.I Consi	deration for the property osure Sale	oil the State Tax Assessor is less than \$50,000					
11. OATH	Aware of penalties as se best of our knowledge and besign below:	t forth by Title 36 §4641-K, we elief, it is true, correct, and comp	hereby swear or affi lete. Grantee(s) and Grantor	irm that we have each of their aut	examined this return and to the horized agent(s) are required to Date 2 776 N 18					
	Grantee	Date	Grantor		Date					
12 PREPARER	Name of Preparer Maine Titl	e Services, LLC		per (207) 781-7400						
	Mailing Address 361 US R	oute 1, Falmouth ME 04105		mainetitleservices.com						
			Fax Number	(207) 781-7405						

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

Merits: 0011856807737 Trips: 9182010010075

		00							
140									

MAINE REVENUE SERVICES

	ZRETTD*	00		STATE TI DECLAR		RTAX	(
RET		71	- LE 36, M.R		·	641-46	41N			_06/29/201	8 03:0:	7 PM .	
1. County										2018		•	
SAGADAF	IOC	144- 1 04]							Transfer Ta			
2. Municipality/	Township		- WENTSTON							State of Maine SAGADAHOC			i
BATH		 				۔۔۔ کدس د	\neg						
3. Grantee/ Purchaser	3a) Nametast or Busi THE MAIN	NESS, FIRST, M	PERTY	GROU	P Filo				800 	K/PageRegist	RY USE	ONLY	
	3cl Name LAST or BUS				- W. 400.72								
			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			····· 1.31./11	<u></u> .] [
	PO BOX 4	63							***************************************				
	30 City WISCASSE	T								3g) State	0 4.	579	
4, GRANTOR/ SELLER	4a) Name, LAST or BUS							***************************************	7 (thi SCN or Faderal I	n		and the second
SEFTEU	ROWELL,	SHANE							Jl				
		Chelore Transfer			e-ministrate describight on		-	· ····································] [
	4e) Mailing Address												
	41 FLORA	L STR	EET								-		
	4f) City									4 <u>g) State</u>		Zip Code	<u> </u>
	BATH	_b			طویت در این					ME] [04	530	
5, PROPERTY	5a) Map	8lock	-	Lot	Sub-Lot	20-7-24 ₀ -42-34 ₀ -7	5b) Ty	pe of propert	y-Enter	the code number the	at best	~	1
	32		_	129			heck a	ny that app	ly:		2143	L	
_	5c) Physical Location						لبيدا	o tax maps !uitipie parc		5d) Acreage		······································	_
		13 B	eth 4					ation of pa					
6. Transferta	X 6a) Purchase	Price (if the	transfer is a	gift, enter	n(),))	ба		- Company of the Comp	95	000	.00
	6b) Fair Marke if 6a) was of r	et Value (en Iominal val	16) ter a value c	aniy if you o	entered °0°	'in Ga) o)r	é b		and the state of t			,00
	6¢) Exemption	claim =	Check the bo	ax if either g	rantor or gra	entoe is ç	laimin	ıg exemptle	in from t	ransfer tax and e	xplain,		
					<u> </u>								
7. DATE OF TRA 06-28	NSFER (MM-DD-YYY -2018)	Y) 8.V from								e, Tree Growth, o adivision, partitic	or or chi		I\$ Ģ .
9. SPECIAL CIRC	UMSTANCES—Were thich suggest that the				10,1	INCOMÉ	TAXV	AITHHÉID.) not required to tax because:	withhol	d Maine	27-42-31
	ket value? If yes, check			e or loss			[4	7 Sellerha		ed as a Maine res	ident		
								-:		n received from			
						I	t f	Conside Foresign		r the property is	isža žugi	ง ควกใชกกั	2
11, QATH	Aware of penalt	ijes as set for d belief it is	th by Fitle 30	5 §4641-K, w and comple	re hereby sw te. Grantee(s	vear or al s) and Gr	firm th	hat we have	each ox	samined this retu	in and t	o the be	stoi lgy:
	Grantee /	re/		Date .	वह/२०१४	Granto		gardica		Powell	, Date <u>L</u>	e)ग्रह्म	[18]
12. PREPARER	Grantee Property	David A. King		_ Date		Granto	مران مران	ne Number	207-442-	7 THE R. P. LEWIS CO., LANSING	, U310 ,		energy.
	Name of Preparer Mailing Address		trept, Bath, M	AE 04530	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ine Numicei Iail Address		ce_daveaking@c	enicast	net	
	रत्न्यमार्थे ध्याप्रस्थात						Fax	Number	207-44	2-7010	- Anna Carrier (Street)		
		http://v	ımmınajue č	jov/revenue	/propertyte	ex/transf	ertax/	transfartax	chtm				