DLN: 1001840031543

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

Registry Sagadahoc Date Recorded 07/02/2018 Time Recorded 09:13:00 AM

KE	IID	TITLE 3	6, M.R.S.A. S	SECTIONS §§	4641-46	541N	Trar	ofor Toy	Amount	\$858	00	
Sagadaho	c											
1. County							D	ocument	Number		<u>-0433</u>	12
BATH									Book	2018		
2. Municipality/	Township				]				Page	4352		_
3. GRANTEE/								BOOK	'PAGEREGI	ISTRY US	ONLY	
PURCHASER	BUONAIUT	<b>1</b>	ROSE									
	3a) Name (LAST)	,	(FIRST)				(MI)		) SSN or Feder	al ID		
	BUONAIUT(	Э	NICHOL	_AS			(3.41)	L				
	89 UNION S	 Г	(FIRST)				(MI)	3d	) SSN or Feder	al ID		
	3e) Mailing Address											
	BATH								ME	04	530	
	3f) City								3g) State		Zip Code	
4. GRANTOR/	HOWARD		GARY				W					
SELLER	4a) Name (LAST)		(FIRST)				(MI)	4b)	SSN or Feder	al iD	·	
	HOWARD		LORNA				L					
	4c) Name (LAST)		(FIRST)				(MI)	<u>L</u> 4d)	SSN or Feder	al ID		
	136 RIDGE R	D										
	4e) Mailing Address											<del></del> ,
	BATH								ME	04	530	
	4f) City								4g) Sta		h) Zip Cod	de
5. PROPERTY	27		219			describes	the proper	ty being <b>sol</b>	code number <b>d.</b> (See instruct		202	
	5a) Map	Block	Lot	Sub-Lot	(h	_ `	that appl ax maps e	-	. 110		<del></del>	
	89 UNION ST	ſ				Mult	iple parce	els	0.16			
	5c) Physical Location					Porti	on of par	cel 5	id) Acreage		<u> </u>	
6. TRANSFER TAX	X 6a) Purchase Pr	ice (If the trans	fer is a gift, er	nter "0")			6a	\$195,0	000			.00
	6b) Fair Market	Value (enter a v	alue <b>only</b> if y	ou entered "0	)" in 6a) o	r						ł I
	if 6a) was of no				·		6b					.00
	6c) Exemption cl	aim – 🔲 Check	the box if eith	er grantor or gr	antee is cl	laiming e	exemptio	n from trar	nsfer tax and	explain.		
7. DATE OF TRAI	NSFER (MM-DD-YYYY)	8. WARNIN	IG TO BUYER-I	f the property is	s classified	d as Farm	land. Ope	en Space. T	ree Growth.	or Worki	ng Water	<u></u>
	29 2018			ial penalty coul								
	DAY YEAR							*****			CLASSIF	
	UMSTANCES—Were the nich suggest that the pr			10.	INCOME.	TAX WIT			ot required t x because:	o withho	ld Maine	į
	et value? If yes, check th						Seller has	qualified	as a Maine re			
									eceived from			
							Foreclosu		ne property i	s iess tna	n \$50,000	U
1. OATH	Aware of penalties											
	our knowledge and l	belief, it is true, co 7 HOWARD										
	Claritec	L HOWARD		07/02/2018		NIIO		NAIUTO BUON.			07/02/2 07/02/2	
12. PREPARER	Name of Preparer	MARK WALTZ	Date _	- 77 0272010	Grantor			(207) 79		_ Date _	0110412	2010
	Mailing Address	PO BOX 177		N			Address		ascobaytitle.	com		
	5	BRUNSWICK.	ME 04011			Fay Nu						

DLN: 1001840031446

Registry	Sagadahoc
Date Recorded	07/02/2018
Time Recorded	11:03:00 AM
ansfer Tax Amount	\$2,970.00
Document Number	2018r-04379
	2018

RETTD		TITLE 36, M.R.S.A. SECTION	IS §§4641-4641	N _			12.020.00	1171
Cacadah	2.2			Tran	ister Tax A	\mount _3	\$2,970.00	
Sagadaho	)C			D	ocument N	Number <u>2</u>	2018r-043°	<u>79</u>
				-		Book 2	2018	
BATH	- / <del>T</del>					Page 4	1379	
2. Municipality	y/ Township			-	BOOK/PA		TRY USE ONLY	
3. GRANTEE/ PURCHASER	DEL L'ESTE						-	
	PELLETIER 3a) Name (LAST)	R SANDRA (FIRST)		J.	3h) S	SN or Federal	ID.	
	, , <u> , ,</u>	,,		(1411)	50,5	SIT OF FEDERAL		
	3c) Name (LAST)	(FIRST)		(MI)	3d) S	SN or Federal I	ID .	
	65 BRACKE	ETT ROAD	-					
	3e) Mailing Address			!			ı <del></del>	
	BRUNSWIC	CK				ME	04011	
4 CDANTOD!	3f) City					3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	BATH RIVE	ERWALK, LLC						
	4a) Name (LAST)	(FIRST)		(MI)	4b) S	SN or Federal I	ID	
	4c) Name (LAST)	(FIRST)		(MI)	4d) S	SN or Federal I	ID	
	40 SOUTH S	STREET, SUITE 305						
	MARBLEHI	EAD				3.64	01045	$\neg$
	4f) City	EAD				MA 4g) State	01945 4h) Zip Co	de
5. PROPERTY			5b)	Type of property	/Enter the co		at <b>best</b>	
	26 5a) Map	Block Lot Sub		ribes the proper any that appl		(See instruction	ns)—» 201	
			<del></del>	No tax maps				
		ERCIAL STREET, UNIT 201	H	Multiple parce Portion of par	cel L	0.00		
6. TRANSFER TA	5c) Physical Location					Acreage		7
		Price (If the transfer is a gift, enter "0")		6a	\$675,00	)0		.00
	6b) Fair Marke if 6a) was of n	et Value (enter a value <b>only</b> if you enter	ed "0" in 6a) or	6b				00.
	,			i				] .00
	6c) Exemption	claim – Check the box if either grantor	or grantee is claim	ning exemption	n from transf	er tax and ex	xplain.	
	ANSFER (MM-DD-YYY)	8. WARNING TO BUYER-If the prop front a substantial financial penalty						
06 L	29 2018 DAY YEAR		could be inggeree	a by acvelopii	icii, sabaivi.	non, partitio	CLASSI	
9. SPECIAL CIRC	CUMSTANCES—Were t	here any special circumstances	10. INCOME TAX	(WITHHELD-	Buyer(s) not	required to		
	vhich suggest that the ¡ 'ket value? If yes, check	price paid was either more or less			income tax b	oecause: a Maine resi	idant	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						he State Tax As	sessor
						property is I	ess than \$50,00	)0
11. OATH	Augra of panelti	as an forth hy Title 20 SAC41 K and house	-1	Foreclosu		1.41.		
, i, oaiii	our knowledge and	es as set forth by Title 36 §4641-K, we here d belief, it is true, correct, and complete. Gra	suy swear or affirm intee(s) and Granto	tnat we have or(s) or their au	eacn examin thorized age	ea this retur nt(s) are req	n and to the builted to sign b	est of elow:
		RIVERWALK, LLC Date 07/02/2	2018 Grantor	SANDRA J			Date 07/02/	
	Grantee	Date	2018 Grantor	··········			Date 07/02/	2018
12. PREPARER	Name of Preparer	ERIC SCHAEFFER	Ph	one Number	(207) 846-3			
	Mailing Address	45 FOREST FALLS DRIVE YARMOUTH, ME 04096			closings@c	douglastitle.c	om	<del></del>
		I AKIMOU I II, IME U4090	Fa	ıx Number				

PETTO

DLN: 1001840031115

Registry	Sagadahoc
Date Recorded	07/02/2018
Time Recorded	11:08:00 AM
ansfer Tax Amount	\$1,034.00
Document Number	2018r-04380

RE	TTD	TITLE 3	6, M.R.S.A. SEC	TIONS §§	4641-4	641N			e Kecora		1,034.00	HVI
Sagadaho	oc.									_	-	
1. County							l I	Docume	nt Numb	per <u>2</u>	018r-043	<u> 30 </u>
BATH						3			Bo	ok <u>2</u>	018	
2. Municipality	r/Township		·····						Pa	ge _4	380	
3. GRANTEE/	, 10 ttil 5 in p							BOC	K/PAGE—	REGIST	RY USE ONLY	
PURCHASER	KING 3a) Name (LAST)		ELIZABET (FIRST)	ГН			(M	1)	3b) SSN or F	ederal II	D	
	BEAUDOIN 3c) Name (LAST)		KYLE LEE	E			(MI	i)	3d) SSN or F	ederal II	D	
	7 DUNNING 3e) Mailing Address	STREET A	PT 1									
	BRUNSWIC	Κ							N 3g) St	1E tate	04011 3h) Zip Code	
4. GRANTOR/ SELLER	ARCHER WO	OOD LLC	(FIRST)				(M)	l)	4b) SSN or F		)	
	4c) Name (LAST)		(FIRST)				(MI	<u> </u>	4d) SSN or F	ederal II	<u> </u>	
	21 MARSHA 4e) Mailing Address	LL AVE						•	, 55.14 61 1	cacrario		
	BATH 4f) City								J ∟	1E	04530 4h) Zip Co	
5. PROPERTY	47) City					5b) Tv	no of propo	rty Entor t	he code nur	g) State		de
	25 5a) Map	Block	Lot	Sub-Lot		describ heck ar		erty being s oly:	old. (See in			
	11 COBB RO	AD				□ м	ultiple par ertion of pa	cels	0.10			
6. TRANSFER TA	5c) Physical Location						•		5d) Acrea	ge		7
O. INANSI EN IA	6a) Purchase Pi	ice (If the transf	er is a gift, enter	r"0")			6a	\$235	,000			.00
	6b) Fair Market if 6a) was of no		alue <b>only</b> if you	entered "0"	"in 6a) (	or	6b		-	·		.00
	6c) Exemption c	aim – 🔲 Check	the box if either g	grantor or gra	antee is o	claimin	g exempti	on from tı	ansfer tax	and ex	plain.	
7. DATE OF TRA	ANSFER (MM-DD-YYYY) 29 2018 DAY YEAR		IG TO BUYER–If the stantial financial p									use.
in the transfer w	CUMSTANCES—Were the pirch that the pirches that the pirches to the control of the	ice paid was eithe	er more or less	10.	INCOME	TAX W	Seller ha A waive Conside	income as qualifie r has beer	tax becaus d as a Mai received	se: ne resid	vithhold Main dent ne State Tax As ess than \$50,00	ssessor
11. OATH	Aware of penaltie our knowledge and Grantee ARCHE		rrect, and comple	te. Grantee(s 7/02/2018		antor(s r <u>EI</u>	) or their a LIZABE	uthorized TH KIN	l agent(s) a G	are requ	uired to sign b Date <u>07/02</u> /	elow: /2018
12 DDEDARES	Grantee	D11/1-5=:=	Date	7/02/2018	Granto		YLE LEI				Date <u>07/02</u>	2018
12. PREPARER	Name of Preparer _	BAY AREA TIT					ne Number		775-5900	·lo		
	Mailing Address _	PORTLAND M				E-Ma	all Address	intes(a	bayareatit	ie.com		

## **PROCESSED** ONLINE.

DO NOT RE-PROCESS.

## **RETTD**

DLN: 1001840031690

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

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

Registry	Sagadahoc					
Date Recorded	07/03/2018					
Time Recorded	09:01:00 AM					
Transfer Tax Amount	\$1,421.20					
Document Number 2018r-04408						
Book	2018					
	4408					
BOOK/PAGE—REG						
A						
(MI) 3b) SSN or Fede	eral ID					
(MI) 3d) SSN or Fede	eral ID					
ME	04530					
3g) State	3h) Zip Code					
A (1) (6) (1)	LID					
(MI) 4b) SSN or Fede	eral ID					
L. (MI) 4d) SSN or Fede	eral ID					
<u>ME</u>						
of property—Enter the code number	er that <b>best</b>					
:he property being <b>sold</b> . (See instru that apply:	ctions)—» 220					
ix maps exist iple parcels						
on of parcel $0.00$						
6a \$323,000	.00					
Ψ323,000						
6b	.00					
xemption from transfer tax an	d explain.					
land, Open Space, Tree Growtl	-					
levelopment, subdivision, part	CLASSIFIED					
<b>HHELD</b> – Buyer(s) not required						
income tax because: Seller has qualified as a Maine	resident					
A waiver has been received fro						
	Consideration for the property is less than \$50,000					
Foreclosure Sale we have each examined this r	aturn and to the best of					
ME Have each evailined fills t	ctain and to the best of					

						Tran	sier rax	Amount	\$1,42	1.20	
Sagadaho	oc					Do	ocument	Number	20181	-0440	18
1. County				<u> </u>		-		Book	2018		
BATH	./ <del>-</del>							Page	4408		
2. Municipality	Township					_	ВООК	/PAGEREG		ONLY	
3. GRANTEE/ PURCHASER	LYONS 3a) Name (LAST)		STEPHEN (FIRST)			A (MI)	3b	) SSN or Feder	ral ID		
	3c) Name (LAST)		(FIRST)			(MI)	3d	) SSN or Feder	ral ID		<del>"</del>
	79 OAK ST	REET									
	3e) Mailing Address							7.00		520	
	BATH 3f) City							ME 3g) State		530 Zip Code	
4. GRANTOR/ SELLER	RIBOTA 4a) Name (LAST)		BRIAN (FIRST)			A (MI)	4b	) SSN or Feder		ip code	
	RIBOTA		<b>JENNIFER</b>	_		L.					
	4c) Name (LAST)		(FIRST)			(MI)	4d	) SSN or Feder	al ID		-
	79 OAK ST	REET									
4e) Mailing Address								ME		520	
	BATH 4f) City							ME 4g) Sta		530 h) Zip Cod	de
5. PROPERTY			1			Type of property		code numbe	that <b>best</b>		
	26 5a) Map	Block	135	Sub-Lot		ribes the propert any that apply		d. (See instruc	tions)—»	220	
						No tax maps e Multiple parce		0.00		1	
	79 OAK ST	KEE I				Portion of parce	el L	0.00 5d) Acreage		J	
6. TRANSFER TA	1X	Duine //6 the a turn of					\$323,				.00
		Price (If the transf	-		. (-)	6a	\$323,	000			.00
		et Value (enter a v nominal value)	alue <b>only</b> if you	entered "0" I	n 6a) or	6b					.00
	6c) Exemption	claim – Check	the box if either o	grantor or gran	tee is claim	ina exemption	from trai	nsfer tax and	l explain.		ı
	•		•	, ,					•		
7. DATE OF TRA	ANSFER (MM-DD-YYY 29 2018 DAY YEAR		IG TO BUYER-If th stantial financial p						tion or ch		use.
9. SPECIAL CIRC in the transfer w	CUMSTANCES—Were to which suggest that the ket value? If yes, check	price paid was eithe	er more or less	10. IN	ICOME TAX	Seller has	ncome ta qualified	ot required to because: as a Maine received fror	esident		
						Considera Foreclosu		he property	is less tha	n \$50,00	iO
11. OATH	Aware of penalt	ies as set forth by T	<b>Title 36</b> §4641-K, v	we hereby swe	ar or affirm	that we have e	each exan	nined this re	turn and	to the be	est of
	our knowledge an	d belief, it is true, co	rrect, and comple	ete. Grantee(s)	and Granto	r(s) or their aut	thorized a	igent(s) are r	equired t	o sign be	elow:
	Grantee BRIAN	FER L. RIBOTA		7/02/2010	· ·	STEPHEN A	ALYUN	ND	Date_	07/03/2 07/03/2	2018 2018
12. PREPARER	Name of Preparer	MELISSA PERI		7,03/2010	Grantor Ph	one Number_	(207) 55	3-2590	Date _	011031.	2010
	Mailing Address	75 MARKET ST						@treworgy-b	aldacci.cc	m	
		PORTLAND, M				x Number .					
		http://www.m	aine.gov/revenue	e/propertytax/	transfertax	k/transfertax.l	ntm				

DLN: 1001840031341

Registry	Sagadahoc
Date Recorded	07/03/2018
Time Recorded	10:07:00 AM
ransfer Tax Amount	\$888.80
Document Number	2018r-04415
D1-	2019

KE	ווט	IIILE 36	o, M.R.S.A. SEC	_HONS §§4641	-4641N	Tran	sfer Tax	Amount	\$888.80	)
Sagadaho	ос								2018r-0	
1. County						<i>D</i> .	ocument.			7713
BATH								Book	- 111	
2. Municipality	/Township		<del></del> -					Page .	4415	
3. GRANTEE/							BOOK/F	AGE—REGI	STRY USE OF	VLY
PURCHASER	LEVESQUE		BRANDO	N						
	3a) Name (LAST)		(FIRST)	``		(MI)	3b)	SSN or Feder	al ID	
	LEVESQUE	;	MOLLY							
	3c) Name (LAST)		(FIRST)			(MI)	3d)	SSN or Feder	al ID	
	3e) Mailing Address	RISE DRIVE								
	BRUNSWIC	'IV						ME	0401	1
	3f) City	· K						ME 3g) State	3h) Zip (	
4. GRANTOR/	LEAVER		IONIA TILA	NI		D				
SELLER	4a) Name (LAST)		JONATHA (FIRST)	M		E (MI)	4b)	SSN or Federa	al ID	
	LEAVER		LEIA			E				
	4c) Name (LAST)		(FIRST)			(MI)	4d):	SSN or Federa	al ID	
	5 TARBOX	STREET								
	4e) Mailing Address								<u> </u>	
	BATH							ME	0453	0
	4f) City							4g) Sta	te 4h) Z	ip Code
5. PROPERTY	34		017-000		describes	the propert	y being <b>sold</b>	ode number . (See instruct		202
	5a) Map	Block	Lot	Sub-Lot	Check any	that apply ax maps e				
	5 TARBOX	STREET			☐ Mul	tiple parce	els	0.23		
	5c) Physical Location				Port Port	ion of pard	cel 50	l) Acreage		
6. TRANSFER TA	X 6a) Purchase I	Price (If the transfe	er is a gift, ente	r "0")		6a	\$201,9	00		.00
	6b) Fair Marke	t Value (enter a va	alue <b>only</b> if you	entered "0" in 6	a) or	I.				
	if 6a) was of n	ominal value)				6b				.00
	6c) Exemption	claim – 🔲 Check t	the box if either	grantor or grantee	is claiming	exemption	from trans	fer tax and	explain.	
7. DATE OF TRA	NSFER (MM-DD-YYY)	) 8. WARNING	TO BUYER-If th	ne property is class	ified as Farn	nland, Ope	en Space, Tr	ee Growth,	or Working \	Water-
06	29 2018	front a subs	tantial financial p	penalty could be tr	iggered by	developm	ent, subdiv	ision, partit	`	,
MONTH	DAY YEAR UMSTANCES—Were t	horo any special sire	umstansas	10 INCO	ME TAV MI	TUUEL D	D(a)			ASSIFIED
in the transfer w	hich suggest that the p	orice paid was eithe	r more or less	TO. INCO	IVIE IAA VVII	į	income tax	because:	o withhold N	viaine
than its fair mark	ket value? If yes, check	the box and explain	: 🗌		X			s a Maine re	esident o the State Ta	
									s less than \$5	
						Foreclosu				
11. OATH		es as set forth by Ti belief, it is true, cor								
		HAN E LEAVE			ntor BR					/03/2018
		LEAVER		7/03/2018 Gran	7.70		VESQUI			/03/2018
12. PREPARER	Name of Preparer	VALERIE ARSE	NAULT	·		Number_	(603) 427	-9399		
	Mailing Address	676 POST ROAD			E-Mail	Address .	varsenaul	@reddoorti	tle.com	
		WELLS, ME 040	90		Fax Nu	ımber .				

Merits: 0011863765103 Trips: 7182400670007

7 15 120/8 9:23 AM
20/8 R- 04427
Transfer Tax of 0.00



\*0599900\* **RETTD**  00

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

#### PLEASE TYPE OR PRINT CLEARLY

1. COUNTY SAGADA	HOC DO NO	T USE RED INK!		State-of-Mai SAGADAHOO	He Transfer Tax COUNTY MAINE
2 MUNICIPAL	TTY/TOWNSHIP		_	√ 2018—1	1427 )
BATH				BOOK/PAGE—REGIST	RY USE ONLY
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRST, MI)  CURRIE MANAGEMENT TR  3c) Name LAST, FIRST, MI)	UST			
	3e) Mailing Address 2121 ALLEN PARKWAY, 2	IE, TRUSTEES APT, 1115	<u> </u>		
İ	an chy HOUSTON		( 1	3g) State	3h) Zip Code 77019
4. GRANTOR/ SELLER	4a) Name (LAST, FIRST, MI) CURRIE, JOHN 4c) Name (LAST, FIRST, MI) CURRIE, EILEEN SHEED)				
	4e) Mailing Address 2121 ALLEN PARKWAY, A	<u> </u>		_	
	HOUSTON	<del>, , , , , , , , , , , , , , , , , , , </del>	<u> </u>	4g) State	4h) Zip Code 77019
5. PROPERTY	5a) Map Block - 2011 5c) Physical Location 16 & 18 EAGLE POINT F	.0	No tax maps Multiple parce	number that best of being sold. (See in exist els 5d) Acreage:	rty—Erter the code lescribes the property structions)
6.TRANSFER TAX	6a) Purchase Price (If the transfer is a gift, enter	er "0")	ба Š 🔔		00.00
	6b) Fair Market Value (enter a value only if you if 6a) was of nominal value)	u entered "0" in 6a) or	6b 💲 🔔	78	7900.00
	6c) Exemption claim – Check the box if either	grantor or grantee is claimin	g exemption from	transfer tax and explain	1.
	Individuals to trustees with no chan	ge in beneficial own	ership.		Transition of the state of the
	7. DATE OF TRANSFER (MM-DD-YYYY) 06-29-2018 MONTH DAY YEAR	Tree Growth, a Substar subdivision, partition o	ntial financial pena or change in use.	s classified as Farmland alty could be triggered CLASSIFIED	by development,
which suggest the lifyes, check the l		parket value? 🔲	Seller has que A waiver has	IELD— Buyer(s) not rec Maine income t Jalified as a Maine resid been received from th on for the property is le	ax because; ent e State Tax Assessor is than \$50,000
11. OATH		16 29 2078 Grantor	that we have each	orized agent(s) are requ	red to sign below:
12. PREPARER	Name of Preparer John W. Voorhees,	Esq. Granto		207-443 <b>-1</b> 333	ate
	Mailing Address 839 Washington St. Bath, ME 04530		MONE MONIDER _	john@voorhees	law.com

RETTD

DLN: 1001840031789

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

Registry Sagadahoc Date Recorded <u>07/05/2018</u> Time Recorded 09:43:00 AM

		IIILE	36, M.R.S.A. S	ECTIONS 99	4641-4	641N	anafan T	ax Amount	\$506	00	
Sagadah	oc					l l					
1. County							Docume	ent Number	_	<u>-0442</u>	<u> 29</u>
BATH					]			Book	2018		
2. Municipalit	y/Township				1			Page	4429		_
3. GRANTEE/							ВОС	OK/PAGEREGI	STRY USE	ONLY	
PURCHASER	PLOURDE 3a) Name (LAST)		ANGELA	A		R (A		3b) SSN or Feder	al ID		
	3c) Name (LAST)		(FIRST)			(N	n	3d) SSN or Federa	LID		
	45 DENNY	ROAD					,	ou) oon or redera	טוזו		
	3e) Mailing Address										
	BATH							ME	04	530	
4. GRANTOR/	3f) City							3g) State	3h) Z	ip Code	
SELLER	HART 4a) Name (LAST)		CORY (FIRST)			<u>Г</u> (м		4b) SSN or Federa	ıl ID		
	HART		BARBAR	ŁA		J.					
	4c) Name (LAST)		(FIRST)	<del>-</del>		(M		4d) SSN or Federa	IID		
	101 TUPEL	O DRIVE									
	4e) Mailing Address				<del>-</del>	7	¬ —		<del></del>		
	CRAWFOR  4f) City	DVILLE				· · · · · · · · · · · · · · · · · · ·		] FL	_	327	
5. PROPERTY					1	5b) Type of prope	rtv—Enter t	4g) Star he code number i		n) Zip Cod	de
	19 5a) Map	Block	75			describes the prop neck any that app	erty being <b>s</b>	<b>iold</b> . (See instructi	ons)—»	201	
			Lot	Sub-Lot	[	No tax maps	exist				
	45 DENNY	ROAD			}	Multiple par Portion of pa		0.19		İ	
6. TRANSFER TA	5c) Physical Location							5d) Acreage			
	6a) Purchase	Price (If the transf	_			6a	\$114	,900			.00
	6b) Fair Marke if 6a) was of n	et Value (enter a v Iominal value)	alue <b>only</b> if yo	ou entered "0"	'in 6a) o	r 6b					.00
	6с) Exemption	claim – Check	the box if eithe	r grantor or gra	intee is cl	aiming exempti	on from tr	ansfer tax and	explain.		
06 MONTH	ANSFER (MM-DD-YYYY) 29 2018 DAY YEAR CUMSTANCES—Were ti	front a subs	stantial financia	l penalty could	be trigge	f as Farmland, O <sub>l</sub> ered by develop	ment, sub	division, partiti	on or cha	nge in u	ise. FIED
in the transfer w than its fair mar	vhich suggest that the p ket value? If yes, check	price paid was eithe the box and explair	er more or less n:			A waive	income to as qualified thas been ration for oure Sale	tax because: d as a Maine re: received from the property is	sident the State less than	Tax Ass \$50,000	essor 0
11. OATH	Aware of penalti	es as set forth by T	itle 36 §4641-K,	we hereby swe	ear or affi	irm that we have	each exa	mined this retu	ırn and to	the be	st of
	GranteeCORY I	d belief, it is true, co D. HART		iete. Grantee(s) 07/05/2018	and Gra Grantor	ntor(s) or their a ANGELA	utnorized R. PLOI	agent(s) are red	quired to Date0		
		RA J. HART		07/05/2018	Grantor		1 200		Date_C Date_C		
12. PREPARER	Name of Preparer .	PHENIX TITLE				Phone Number	(207) 7	74-0434	Date		
	Mailing Address	119 MIDDLE ST	REET			E-Mail Address		n@phenixtitle.c	om		_
		PORTLAND, MI	E 04101	<del>.</del>		Fax Number					

Merits: 0011863765004 Trips: 7182400670009



SPR

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX

	6
且	4456
2018-	07/05/2018 01:38 PM
	2018R-04456
-	Transfer Tax of 792.00
	State of Maine Transfer i

	IZRETTD	DECLARATION	11 -	4436	
	TTD	TITLE 36, M.R.S.A. SECTIONS \$\$4641-	46411 2019	97/05/2018	101.38 DM
1. County		•		2018R-	
Sagadaho	C			Transfer Tax	
2. Municipality	//Township			State of Maine	
Bath		The same of the sa	-	SAGADAHOC C	JORIT MAINE
3. GRANTEE/			···	BOO-(/PAGE—REG ST	RY USE ONLY
PURCHASER	3al Namo LAST or BUSINESS FIE	ST, ANI			
	HYDE SCHOOL				
	3ct_Name_LAST_or BUSINESS_FIR	ST.ML			
	3e) Mailing Address		· · — • '		
	616 HIGH STREET				
	3f) Gty BATH			39) State	_sn/zip code
4. GRANTOR/	4a) Name, LAST or BUSINESS, FIR	5T, M1		= 1	
SELLER	GOTTFRIED	JOANNE	В.		
	40 Name LAST or BUSINESS, FIRE			C	
	CHRISTENSEN	WENDY	M_	İ	
	4e) Mailing Address	20040 40			
	10 BUTTONWOOI	D ROAD, 1R			
	4f) Gty			୍ ୁଣ୍ଡୀ State	4b) Zip Code
	ESSEX FELLS	· ·		NJ NJ	07021
5. PROPERTY	Sa) Map Bloc	k Lot Sub-Lot	5b) Type of property—En	ter the code number tha	t best
	31	054	describes the property be Check any that apply:	ing sold. (See instruction	5)
	5c) Physical Location		No tax maps exist	5d) Acreage	
	4 Redion Road		Multiple parcels Portion of parcel	- Aller - Control - Contro	
6.TRANSFERTA	X	77 (17)		<u> </u>	·
	6a) Purchase Price (If I	the transfer is a gift, enter "0")	ба		\$ 180,000.00
	6b) Fair Market Value ( if 6a) was of nominal v	(enter a value only if you entered "0" in 6a)			
			6b		
	6c) Exemption claim –	Check the box if either grantor or grantee is	claiming exemption fro	m transfer tax and exp	dain.
***************************************		<u></u>		<del>-</del>	
i .	6	I. WARNING TO BUYER—If the property is classific ront a substantial financial penalty could be trig	ed as Farmland, Open Sp	cace, Tree Growth, or \	Working Water-
MONTH	03 2018 DAY YEAR	Density could be till	gered by development	sanarristant barridar	CLASSIFIED
9. SPECIAL CIRC	UMSTANCES—Were there any	special circumstances 10.INCOM	ETAX WITHHELD-Buye		ithhold Maine
	hich suggest that the price paid set value? If yes, check the box a			me tax because: lified as a Maine resid	ent
			· ·	een received from the	
		;	Consideration	for the property is les	
			Foreclosure Sa		· · · · · · · · · · · · · · · · · · ·
11. OATH	Aware of penalties as set our knowledge and belief, it	forth by Title 36 \$4641-K, we hereby swear or a is true, correct, and complete. Grantee(s) and Gr	ffirm that we have each antor(s) or their authori	examined this return zed agent(s) are requi	and to the best of
	Grantee WARLAND	1/1 Soite 6128118 Granto	X - July	ale o	ate 1/3/18
15 marnamen	Grantee John	Date 6 28 18 Granto	chieffina	ncialoffica o	ate
12. PREPARER		Voorhees, Esq.	Phone Number (20	07)443-1333	
	Mailing Address 839 Was Bath, ME	shington St. 04530		in@voorheeslaw.com 07)443-2273	
-			Fax Asimber (20	// J440*EE(3	<b>9</b>

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

DLN: \_1001840031812

Registry	Sagadahoc
Date Recorded	07/05/2018
Time Recorded	02:47:00 PM
ransfer Tax Amount	\$611.60
Document Number	2018r-04461
Rook	2018

KE	שוו:	TITLE 36, M.R.S.A. SECTI	ONS §§4641-4641N				
Cocadala				Transfer	Tax Amount	\$611.60	
Sagadah 1. County	oc			Docum	nent Number	2018r-044	<u>6</u> 1
					Book	2018	
BATH					Page		
2. Municipalit	ty/Township			B(	. rage OOK/PAGE—REGI		
3. GRANTEE/ PURCHASER			Ļ		DOINT AGE—INEGI	JINI OSE ONEI	
	BERNIER 3a) Name (LAST)	AMANDA					
	Sa) Name (LAST)	(FIRST)		(MI)	3b) SSN or Feder	al ID	
	3c) Name (LAST)	(FIRST)		(MI)			
		EAG ROAD		(MI)	3d) SSN or Federa	al ID	
	3e) Mailing Address			_			
	BATH				ME	04530	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	AUSTIN	SHAWN		A			
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Federa	al ID	
	AUSTIN	KRISTEN		В			
	4c) Name (LAST)	(FIRST)		(Mi)	4d) SSN or Federa	II ID	
	3 DUDLEY	ROAD					
	4e) Mailing Address					<b>-</b>	
	FOXBORO				MA	02035	
5. PROPERTY	4f) City				4g) Sta		de
J. I KOI EKI I	15	31	describes	the property being	r the code number t g <b>sold.</b> (See instructi	that <b>best</b> ons)—» 201	
	5a) Map	Block Lot	and-rot	that apply: tax maps exist			
	169 WHISK	EAG ROAD	│	tiple parcels	0.69		
	5c) Physical Location		Port	tion of parcel	5d) Acreage		
6. TRANSFER TA	AX 6a) Purchase	Price (If the transfer is a gift, enter "0"	")	6a \$13	9,000		.00
	бb) Fair Marke	et Value (enter a value <b>only</b> if you en	tered "0" in 6a) or				]
	if 6a) was of n		·	6b			.00
	6c) Exemption	claim – Check the box if either gran	ntor or grantee is claiming	exemption from	transfer tax and	explain.	_
7. DATE OF TRA	ANSFER (MM-DD-YYY)	8. WARNING TO BUYER-If the pr	coperty is classified as Farn	nland Open Spa	ce Tree Growth	or Marking Mata	
06	29 2018	front a substantial financial pena	alty could be triggered by	development, su	ıbdivision, partiti	on or change in	use.
MONTH CIP	DAY YEAR					CLASSI	
in the transfer w	which suggest that the p	here any special circumstances orice paid was either more or less	10. INCOME TAX WIT		s) not required to e tax because:	withhold Maine	!
than its fair mar	ket value? If yes, check	the box and explain:			ied as a Maine re	sident	
					en received from		
				Foreclosure Sale	or the property is	less than \$50,00	0
11. OATH	Aware of penalti	es as set forth by Title 36 §4641-K, we h	ereby swear or affirm that	we have each e	xamined this retu	ırn and to the be	est of
	our knowledge and	belief, it is true, correct, and complete. (	Grantee(s) and Grantor(s) o	or their authorize	ed agent(s) are red	quired to sign be	low:
		NI PALICTINI 07/05	/2010	ANDA BEKI	NIEK	Date 07/05/	
12. PREPARER	Name of Preparer	LINDA DAIGLE	Grantor	Number(207)	376-0634	Date <u>07/05/</u>	2010
	Mailing Address	181 CENTER STREET		Address <u>ldaig</u>		···	_
	<u></u>	AUBURN, ME 04210	Fax Nu				<del></del>
		haten 11		_			

### **RETTD**

DLN: 1001840031926

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

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

 Registry
 Sagadahoc

 Date Recorded
 07/06/2018

 Time Recorded
 09:54:00 AM

 after Tax Amount
 \$1,276.00

	110	IIILES	0, M.R.S.A. SE	CTIONS 99462	11-4641N		r Tax Amount	\$1,276.00	)
Sagadah	oc						ment Number		
1. County						Doct			+00
ВАТН, Е	BATH							2018	
2. Municipality	y/Township						- ,	4466	
3. GRANTEE/ PURCHASER							BOOK/PAGE—REG	ISTRY USE ONLY	{ <b>===</b>
TORCHASER	CARTTERI	TELD	AARON			C			
	3a) Name (LAST)		(FIRST)			(MI)	3b) SSN or Feder	al ID	
	3c) Name (LAST)		(FIRST)			(MI)	2 % 65% - 7	<del></del>	
		N AVENUE					3d) SSN or Feder	aliD	
	3e) Mailing Address								_
	BATH						ME	04530	
4 COANTOR (	3f) City						3g) State	3h) Zip Cod	
4. GRANTOR/ SELLER	ABERG		CAROLY	N		A			
	4a) Name (LAST)		(FIRST)			(MI)	4b) SSN or Federa	al ID	
	Ac) Nome - (LACT)								
	4c) Name (LAST)	INCTON CT	(FIRST)			(MI)	4d) SSN or Federa	al ID	
	4e) Mailing Address	INGTON ST	<u>KEE1</u>						
	BATH						ME	7 (04520	
	4f) City						ME4g) Sta	04530 tte 4h) Zip 0	ode
5. PROPERTY	28		10				ter the code number	that <b>best</b>	
	5a) Map	Block	19	Sub-Lot	Check a	oes the property be ny that apply:	ing <b>sold.</b> (See instruct	ions)—» 202	2
	37 WESTER	NAVENITE				o tax maps exist Jultiple parcels	0.65		
	5c) Physical Location	NAVENUE				ortion of parcel	0.65 5d) Acreage		
6. TRANSFER TA	X 6a) Purchase I	Price (If the transf	or is a gift onto	ντ"O")		<u> </u>			7 00
		t Value (enter a v	<b>.</b>	,	5a) au	6a <b>\$</b> 2	90,000		00
	if 6a) was of n		aide <b>Oilly</b> ii you	rentered o m	oa) Or	6b			.00
	6c) Exemption	claim – 🔲 Check	the box if either	grantor or grante	e is claimin	a exemption from	m transfer tax and	explain	
			·	J J		J	ar cransici can aria	схрини	
7. DATE OF TRA	NSFER (MM-DD-YYYY	) 8. WARNIN	G TO BUYER-If th	ne property is clas	sified as Fa	rmland Open Sr	pace, Tree Growth,	or Working Wat	tor
06	29 2018	front a subs	tantial financial	penalty could be	triggered b	y development,	subdivision, partiti	ion or change i	n use.
MONTH CIRC	DAY YEAR							CLASS	
in the transfer w	<b>UMSTANCES</b> —Were the phich suggest that the p	orice paid was eithe	er more or less	10. INC	OME TAX W		r(s) not required to me tax because:	withhold Mair	ne
than its fair mark	ket value? If yes, check	the box and explair	):		Σ	Seller has qua	lified as a Maine re		
					-		een received from for the property is		
						Foreclosure Sa	ile		
11. OATH	Aware of penaltic our knowledge and	es as set forth by Ti	itle 36 §4641-K, v	we hereby swear o	or affirm th	at we have each	examined this retu	urn and to the l	oest of
	Grantee CAROL	YN A ABERG					zed agent(s) are re RTTERFIELD	quired to sign b 07/09	
	Grantee			7/00/0010	intor			Date 07/09	
12. PREPARER	Name of Preparer	LINDA DAIGLE				ne Number <u>(20</u>	7) 376-0634		<u> </u>
	Mailing Address .	181 CENTER ST			E-Ma	il Address <u>lda</u>	gle@hdtitle.com		
		AUBURN, ME 0	4210		Fax N	Number			

## **PROCESSED** ONI INF

DLN: \_1001840031969

## **MAINE REVENUE SERVICES**

Registry Sagadahoc

	RE-PROCE	22	REAL ESTATE T		X		Dat	e Recorded	07/	06/201	8
	TTD		<b>DECLAR</b> TITLE 36, M.R.S.A. SECT		IC 41 NI		Tim	e Recorded	11:	21:00 A	4M
			TITLE 30, W.R.S.A. SECT	10N3 994641-4	164 I N	Tran	sfer T	ax Amount	\$93	32.80	
Sagadah	oc					D	ocume	nt Number	· 201	   8r-044	76
1. County									201		70
BATH											_
2. Municipalit	ty/Township						POC	_	447		_
3. GRANTEE/ PURCHASER					ļ		ВОС	)K/PAGE—RE	ואוכוט	USE ONLY	
	WHITE  3a) Name (LAST)		MEREDITH	I		M	i				
	Sa) Name (LAST)		(FIRST)			(MI)		3b) SSN or Fed	eral ID		
	3c) Name (LAST)		(FIRST)			(MI)		3d) SSN or Fed	oraLID		
	277 CENTI	RE STR	EET			]		30/ 33N OI 1 eu	arai ID		
	3e) Mailing Address					J					
	BATH							ME	i	04530	ŀ
4. GRANTOR/	3f) City							3g) State	3	3h) Zip Code	
SELLER	JOHNSON		MIRIAM			A					
	4a) Name (LAST)		(FIRST)			(MI)		4b) SSN or Fede	eral ID		
	KANE 4c) Name (LAST)		CLAYTON (FIRST)			В					
	2 PARK ST	REET	(11/31)			(MI)	•	4d) SSN or Fede	ral ID		
	4e) Mailing Address										
	BATH							ME		04530	
	4f) City						-	4g) S		4h) Zip Co	ode
5. PROPERTY	28		317					he code numbe <b>old</b> . (See instru			
	5a) Map	Block	Lot	Sub-Lot Cl	heck any	that apply tax maps e	:		,	202	
	277 CENTR	E STR	EET BATH ME	-		tax maps e. Itiple parce		0.17			
	5c) Physical Location				Port	ion of parc	el	5d) Acreage			
6. TRANSFER T	AX 6a) Purchase	Price (If tl	ne transfer is a gift, enter "(	0")	_	6a	\$212	.000			.00
	6b) Fair Mark	et Value (e	enter a value <b>only</b> if you e	ntered "0" in 6a) c	or	L					] '''
	if 6a) was of r	nominal v	alue)			6b					.00
	6c) Exemption	claim –	Check the box if either gra	intor or grantee is c	laiming	exemption	from tr	ansfer tax an	d explai	in.	
7. DATE OF TRA	ANSFER (MM-DD-YYY		WARNING TO BUYER-If the p	property is classified	d as Farr	nland, Ope	n Space	, Tree Growth	ı, or Wo	rking Wate	r-
07	06 2018	fre	ont a substantial financial per	nalty could be trigg	ered by	developme	nt, sub	division, part	ition or		
9. SPECIAL CIRC	DAY YEAR CUMSTANCES—Were	here any s	pecial circumstances	10. INCOME	TAY WI	THHEI D- G	Invor(c)	not required	اطفنید مع	CLASSII	
in the transfer v	vhich suggest that the ket value? If yes, check	price paid	was either more or less	ro. iiicomi		iı	ncome t	ax because:			2
charries fair mai	ket value: II yes, check	the box ar	nd explain:		X			d as a Maine i received froi			
								the property			
11. OATH		<del></del>				Foreclosur	e Sale				
II. OAIII	our knowledge an	i <b>es as set f</b> d belief, it i	orth by Title 36 §4641-K, we s true, correct, and complete.	hereby swear or aff . Grantee(s) and Gra	firm that antor(s) o	: we have e or their auti	ach exa norized	mined this re agent(s) are a	turn an	d to the be	est of
	Grantee MIRIA	M A JOH	$\frac{\text{INSON}}{\text{Date}} = \frac{07/0}{2}$	09/2018 Grantor	ME	REDITH	M W	HITE		e 07/09/2	
40 00000	Grantee CLAY1	ON B K	Date	09/2018 Grantor						e 07/09/2	
12. PREPARER	Name of Preparer		THY JOST		Phone	Number_					
	Mailing Address		ASANT STREET				dorothy	@cumberlan	dtitle.co	<u>m</u>	
		DICONS	SWICK, ME 04011		Fax Nu	ımber _					

Merits: 0011863765406 Trips: 7182400670013

00

\*12RETTD\*

RE	TTD	36 M.R.S. §§ 4641-46411	N	/			04522
1. County				1	00		
SAGADA	HOC				State	Transfer	Tax of Transfer Tax
2. Municipality	//Township			1	SAGA	DAHOC CO	DUNTY MAINE
BATH		*				2018-4	522)
3. GRANTEE/ PURCHASER			<u>-</u>		воок	PAGE—REGISTE	YUSEONIY
	3a) Name LAST or BU	ISINESS, FIRST, MI V. ALLEN THIRD PARTY SUPP. C	מד בעגי	TICT	1 [		
	3c) Name, LAST or BU			TRST	<u> </u>		
	3 WREN C	ofter purchase of this property COURT, APT 10A					
	3f) City MERRIMA	CK				NH	03054
4. GRANTOR/ SELLER	4a) Name, LAST or BU	ISINESS, FIRST, MI L'E L'ALLEN LIVING TRUST, DTD	7/27/10	00			
	4c) Name LAST or BU			<i></i>			
	4e) Mailing Address PO BOX 3	32				•	
	4f) City GREENVII	LLE				4g) State ME	4h) ZIP Code 0 4 4 4 1
5. PROPERTY	5a) Map  20  5c) Physical Location 22 VALLE	Plock Lot Sub-Lot  150  Y ROAD	describ Check ar No	es the propert ny that apply o tax maps e ultiple parce	y being solo r: xist 5 Is	code number that d. (See instructions d) Acreage	
∠ TRANSFER TA				rtion of parc	el		•
6. TRANSFER TA	6a) Purchase	Price (If the transfer is a gift, enter "0")		ба			.00.
		tet Value (enter a value <b>only</b> if you entered "0" in nominal value)	6a) or	6b		13	33200.00
	6c) Exemption	claim – 🔽 Check the box if either grantor or grant	ee is claiming	g exemption	from tran	sfer tax and exp	lain.
		er to a trustee were if that person	on were t	he grante	e (son	) no tax wo	uld be imposed
	NSFER (MM-DD-YYY 24 20 18 DAY YEAR	(Y) 8. WARNING TO BUYER-If the property is cla front a substantial financial penalty could be					
in the transfer w	hich suggest that the	there any special circumstances 10. INC price paid was either more or less k the box and explain:	OME TAX W	Seller has	ncome tax qualified a	ot required to wi because: as a Maine resid	ent
	Se	e 6c)above		5,	tion for th	eceived from the e property is les	e State Tax Assessor is than \$50,000
11. OATH	Aware of penalt our knowledge an Grantee	ties as set forth by 36 M.R.S. § 4641-K, we hereby swind belight it in true, correct, and complete. Grantee(s) at	ear or affirm nd Grantor(s) rantor	or their aut	e each exa horized ac	gent(s) are regyi	rn and to the best of red to sign below:
to partiers	Grantee		rantor		007) 505		ate
12. PREPARER	Name of Preparer	Nelson-Reade Law Office, P.C. 813 Washington Avenue		يم بهاطانتها عا	207) 828-	-1597 relderlaw.com	
1	Mailing Address	Portland, ME 04103		17001633 _	(207) 828		
Rev. 12/I	5	http://www.maine.gov/revenue/propertytax/t		amindei _			<b>_</b>

DLN: 1001840032218

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

Registry Sagadahoc Date Recorded 07/10/2018

RE'	TTD	TITLE 36, M.R.S.A. SECTIONS	§§4641-4641N		Time Recorded	02.23.00 F	IVI
0 11				Tran	sfer Tax Amount	\$88.00	
Sagadaho	<u> </u>			D	ocument Number	2018r-045	41
					Book	2018	
BATH	/T					4541	
2. Municipality 3. GRANTEE/	Township			ļ	BOOK/PAGE—REC		
PURCHASER	XX II COD						
	WISE 3a) Name (LAST)	SANDRA (FIRST)		R (MI)	2h) 66N 5- 4-		
	MARTIN	BRIAN			3b) SSN or Fede	raiiD	
	3c) Name (LAST)	(FIRST)		E (MI)	3d) SSN or Fede	ral ID	
	170 OAK S'	TREET		7	,		
	3e) Mailing Address				<del></del>		
	BATH				ME	04530	
4. GRANTOR/	3f) City				3g) State	3h) Zip Code	
SELLER	DAUPHIN	HAROLD					
	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Fede	ral ID	
	DAUPHIN 4c) Name (LAST)	KATHY					
		JVER ROAD		] (MI)	4d) SSN or Fede	ral ID	
	4e) Mailing Address	IVER ROAD		J			
	WHITEFIEI	D			ME	04241	
	4f) City				ME 4g) St	04341 ate 4h) Zip Co	de
5. PROPERTY	24		5b) Tyr	oe of property-	—Enter the code numbe	r that <b>best</b>	
	34 5a) Map	Block Lot Sub-L	L Chack an	es the property by that apply	y being <b>sold</b> . (See instruc ':	tions)—» 102	
	LOTONIII		No	tax maps ex			
	5c) Physical Location	GH STREET		ultiple parce rtion of parc	el <u>0.20</u>		
6. TRANSFER TA	Y	25-05-1	-		5d) Acreage		1 00
		Price (If the transfer is a gift, enter "0")		6a	\$20,000	<del></del>	.00
	if 6a) was of n	et Value (enter a value <b>only</b> if you entered ominal value)	1"0" in 6a) or	6b			.00
	6c) Exemption			L	6		,
	oc, Exemption	Check the box if either grantor o	r grantee is claiming	g exemption	from transfer tax and	i explain.	
7 DATE OF TRAI	NSFER (MM-DD-YYY)						
	10 2018	8. WARNING TO BUYER-If the proper front a substantial financial penalty contact.	ty is classified as Far ould be triggered by	mland, Oper / developme	n Space, Tree Growth, ent, subdivision, parti	, or Working Wate tion or change in	r- use.
	DAY YEAR		,	•	71.	CLASSI	
9. SPECIAL CIRCL	UMSTANCES—Were t	here any special circumstances	10. INCOME TAX W		Suyer(s) not required t	o withhold Maine	·
than its fair mark	et value? If yes, check	orice paid was either more or less the box and explain:	Г		ncome tax because: qualified as a Maine r	esident	
				A waiver h	as been received fron	n the State Tax Ass	
			X		tion for the property i	s less than \$50,00	0
11. OATH	Aware of penalti	es as set forth by Title 36 §4641-K, we hereby	v swear or affirm the	Foreclosur		turn and to the ho	est of
	our knowledge and	belief, it is true, correct, and complete. Grant	ee(s) and Grantor(s)	or their auth	horized agent(s) are re	equired to sign be	low:
	V A TILLY	DAUPHIN Date 07/10/2010 07/10/200	10	NDRA R	<del></del>	Date 07/10/	
12. PREPARER		JAMES HOPKINSON  Onte 07/10/201		IAN E M.		Date07/10/2	2018
	Name of Preparer , Mailing Address	6 CITY CENTER SUITE 400			(207) 772-5845 jhopkinson@hablaw.	com	
	Maining Addless	PORTLAND, ME 04101		I Address _ umber _	Jopkinson@nauiaw.	COIII	

# PROCESSED ONLINE.

DLN: 1001840032221

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry Sagadahoc

DO NOT	<b>RE-PROCES</b>	''   22		A DATION		·^		Date K	ecoraea .	0//11/20	18
	TTD		<b>DECL</b> 36, M.R.S.A. SI	ARATION		6411		Time R	ecorded	10:01:00	AM
			. 50, M.N.S.A. 31	-C 110N2 33	4041-4	104 IIV	Transf	er Tax	Amount	\$2,246.2	0
Sagadaho	oc						Doc	ument l	Number	2018r-04	1548
1. County									Book	2018	
BATH									Page		
2. Municipality	r/Township							R∩∩K/D	٠.	STRY USE ONL	
3. GRANTEE/ PURCHASER								000101	AGE NEGI	STRT OSE ONE	-1
	TRBH, LLC		(FIDCT)								
	Sa) Name (LAST)		(FIRST)				(MI)	36)	SSN or Federa	al ID	
	3c) Name (LAST)		(FIRST)				(MI)	3d) <sup>9</sup>	SSN or Federa	al ID	
	755 SLIGO	ROAD						34,	, , , , , , , , , , , , , , , , , , ,		
	3e) Mailing Address										
	NORTH YA	RMOUTH							ME	04097	7
4. GRANTOR/	3f) City								3g) State	3h) Zip Co	de
SELLER	MARCH PR	OPERTIES	, LLC					İ			
	4a) Name (LAST)		(FIRST)				(MI)	4b) S	SN or Federa	II ID	
	4c) Name (LAST)		(FIRST)								
	12135 BROI	ZENI BOLIC					(MI)	4d) 9	SN or Federa	l ID	
	4e) Mailing Address	XEN BOOK	III DKIVE								
	HOUSTON								TX	77024	
	4f) City								4g) Stat		
5. PROPERTY	26		114			5b) Type of prodescribes the p					1
	5a) Map	Block	Lot	Sub-Lot	c	heck any that	apply:	_	(See Instructi	ions)—» <u>20</u>	
	962 MIDDL	E STREET		<del></del>	7	No tax n Multiple		it [	0.36		
	5c) Physical Location	<u> </u>				Portion		<b>L</b> 5d	) Acreage		
6. TRANSFER TA	X 6a) Purchase I	Price (If the tran	sfer is a gift, ent	er"0")			6a S	510,49			.00
			value <b>only</b> if yo		"in 6a) c	nr.		510,4.			00
	if 6a) was of n		varae <b>omy</b> ii yo	a cintered o	iii oa, c	J1	6b				.00
	6c) Exemption	claim – Che	ck the box if eithe	r grantor or gr	antee is c	laiming exen	nption fr	om trans	fer tax and	explain.	
		_								·	
7. DATE OF TRA	NSFER (MM-DD-YYYY	() 8. WARN	ING TO BUYER-If	the property is	s classifie	d as Farmlan	d. Open :	Space, Tre	ee Growth.	or Working Wa	ater-
07	09 2018	front a su	bstantial financia	l penalty could	d be trigg	gered by deve	lopmen	t, subdivi	sion, partiti	on or change	in use.
MONTH	DAY YEAR										SSIFIED
n the transfer w	UMSTANCES—Were the properties that the property	nere any speciai c price paid was eit	her more or less	10.	INCOME	TAX WITHH		yer(s) not ome tax l		withhold Ma	ine
than its fair mark	ket value? If yes, check	the box and expl	ain:						a Maine re		
										the State Tax less than \$50	
							closure		property is		,000
I1. OATH	Aware of penalti- our knowledge and	es as set forth by	Title 36 §4641-K,	we hereby sw	vear or af	firm that we	nave eac	h examir	ned this retu	urn and to the	best of
			ES, LLC <sub>Date</sub> (			$r = \frac{TRBH}{r}$		nizeu age	enu(s) are re	quired to sign _ Date <u>07/1</u>	
	Grantee			07/11/2018	Granto					Date 07/1	
12. PREPARER	Name of Preparer .	ERIC SCHAE				Phone Nun	nber <u>(</u> 2	207) 846-	3460		
	Mailing Address .	45 FOREST F				E-Mail Add	ress <u>c</u>	losings@e	douglastitle	.com	
		YARMOUTH,	ME 04096			Fax Numbe	r				

DETER

DLN: 1001840032411

Registry	Sagadahoc
Date Recorded	07/12/2018
Time Recorded	12:14:00 PM
ransfer Tax Amount	\$642.40
Document Number	2018r-04589

RE	TTD	TITLE 36, M.R.S.A. SECTIO	NS §§4641-4641N	T	Time Recorded		<u>M</u>
Sagadaho	nc .				sfer Tax Amount		
1. County	,,,			Do	ocument Number	2018r-0458	39
BATH	· · · · · · · · · · · · · · · · · · ·				Book	2018	
2. Municipality	//Township				Page	4589	
3. GRANTEE/	7 TOWNSHIP				BOOK/PAGE—REG	SISTRY USE ONLY	
PURCHASER			Ŀ	*			
	KELLEY 3a) Name (LAST)	KATHLEEN (FIRST)		S (MI)	3b) SSN or Fede	ral ID	
	KELLEY	JONATHAN			35/ 33N 01 Tede	Tai ID	
	3c) Name (LAST)	JONATHAIN (FIRST)		M	3d) SSN or Fede	ral ID	
	51 WESTSII	DE DRIVE			,		
	3e) Mailing Address						
	BATH				ME	04530	
	3f) City				3g) State	3h) Zip Code	
4. GRANTOR/ SELLER	DRAKE	SHARON					
JELLER	4a) Name (LAST)	(FIRST)		(MI)	4b) SSN or Fede	ral ID	
	DRAKE	THEODORE					
	4c) Name (LAST)	(FIRST)		(MI)	4d) SSN or Feder	ral ID	
	54 NORTH S	STREET					
	4e) Mailing Address						
	BATH				ME	04530	
	4f) City				4g) St	ate 4h) Zip Co	de
5. PROPERTY	20	354			Enter the code number being <b>sold</b> . (See instruc		
	5a) Map		ub-Lot Check any	y that apply	:	202	
	8 CUMMING	GS STREET		tax maps ex Itiple parcel			
	5c) Physical Location	SO STREET		tion of parc	1 0.17		
6. TRANSFER TA	X 6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a [	\$145,700		.00
		t Value (enter a value <b>only</b> if you enter		<sup>04</sup> L	\$143,700		] .00
	if 6a) was of n		red o in ba) or	6b			.00
	6с) Exemption	claim – Check the box if either grant	or or grantee is claiming	evemntion	from transfer tay and	1 ovolain	J
	5-7, <u>2</u> <b></b>		or grantee is claiming	CACITIPATOR	mom transfer tax and	rexplain.	
	NSFER (MM-DD-YYYY	<ul><li>8. WARNING TO BUYER-If the profront a substantial financial penal</li></ul>					
MONTH	12 2018 DAY YEAR		, could be inggered by	developine	in, subulvision, pare	CLASSI	
	***	nere any special circumstances	10. INCOME TAX WI	THHELD-B	uver(s) not required		
		orice paid was either more or less	_	ir	ncome tax because:		•
than its fair mark	ket value? If yes, check	the box and explain:	X	4	qualified as a Maine r		
			<u> </u>	7	as been received fror tion for the property		
				Foreclosur			
11. OATH	Aware of penaltic	es as set forth by Title 36 §4641-K, we he	reby swear or affirm tha	t we have e	ach examined this re	turn and to the be	est of
	CILADO	belief, it is true, correct, and complete. GN $\overline{DRAKE}$ Date $07/12/$	0010			_	
	THEOD	N DRAKE         Date         0//12/           ORE DRAKE         Date         07/12/	(0.01.0		S KELLEY M KELLEY	Date <u>07/12/</u> Date <u>07/12/</u>	
12. PREPARER	Name of Preparer	JAMES HOPKINSON			(207) 772-5845	Date	2010
	Mailing Address .	6 CITY CENTER SUITE 400			jhopkinson@hablaw.	.com	_
	a.mig / idaicss	PORTLAND, ME 04101		umber _			

DLN: 1001840032401

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

 Registry
 Sagadahoc

 Date Recorded
 07/12/2018

 Time Recorded
 12:37:00 PM

 sfer Tax Amount
 \$1,166.00

RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§4641	1-4641N		i iiile K	ecoraea	12.37.001	r IVI
				Tran	isfer Tax	Amount	\$1,166.00	
Sagadah	oc			D	ocument l	Number	2018r-046	502
1. County				4		Book	2018	
BATH							4602	
2. Municipalit	y/Township			4	BOOK/P	- •	ISTRY USE ONLY	
3. GRANTEE/ PURCHASER							JIM OSE ONE	
	METZGER 3a) Name (LAST)	JOHN		Н				
	Ja) Name (EAST)	(FIRST)		(MI)	36)	SSN or Feder	al ID	·
	3c) Name (LAST)	(FIRST)		(MI)	3d)	SSN or Feder	al ID	
	PO BOX 108	81			34,	-Sit of Feder		
	3e) Mailing Address							
	BATH					ME	04530	
	3f) City					3g) State	3h) Zip Code	e
4. GRANTOR/ SELLER	MARTIN	CHARLES		J				
	4a) Name (LAST)	(FIRST)		(MI)	4b) S	SN or Feder	al ID	
	MARTIN	KATHLEEN		C				
	4c) Name (LAST)	(FIRST)		(IM)	4d) 9	SN or Federa	al ID	
	561 TIFFAN	IY COURT						
	4e) Mailing Address						7	
	WARRENTO	JN		<u></u>		VA	20186	
5. PROPERTY	47 City		5h) Tv	pe of property	/_Enter the c	4g) Sta		ode
	39	30	describ	pes the proper ny that appl	ty being <b>sold</b> .			!
	5a) Map	Block Lot Sub-Lot		o tax maps e	•		— <u> </u>	
	136 WASHII	NGTON STREET		ultiple parce ortion of pare		0.00		
6. TRANSFER TA	5c) Physical Location			rtion of part	5d	) Acreage		
O. IKANSFER I	6a) Purchase F	Price (If the transfer is a gift, enter "0")		6a	\$265,00	00		.00
		et Value (enter a value <b>only</b> if you entered "0" in 6a	a) or	_ [				آ م
	if 6a) was of no			6b [				00
	6c) Exemption	claim – Check the box if either grantor or grantee	is claimin	g exemptior	n from trans	fer tax and	explain.	
	ANSFER (MM-DD-YYYY		ified as Fa	rmland, Ope	en Space, Tre	e Growth,	or Working Wat	er-
07 L	09 2018	front a substantial financial penalty could be tri	nggerea b	y aevelopm	ent, subaivi	sion, partit	ion or change in CLASS	
	DAY YEAR CUMSTANCES—Were th	here any special circumstances 10. INCOI	ME TAX W	/ITHHELD-	Buver(s) not	required t	o withhold Mair	
in the transfer v		orice paid was either more or less	_	:	income tax	because:		
criair its iair illai	net value: II yes, check	the box and explain:	-		qualified as		esident n the State Tax A	ccaccor
				_			s less than \$50,0	
14 OATH	<del></del>			Foreclosu				
11. OATH	Aware of penaltic our knowledge and	es as set forth by Title 36 §4641-K, we hereby swear or I belief, it is true, correct, and complete. Grantee(s) and	r affirm th Grantor(s	at we have a	each examir thorized age	ned this ret ent(s) are re	urn and to the beguired to sign b	pest of
	Grantee CHARL	ES J MARTIN Date <u>07/12/2018</u> Gran		HN H MI			_ Date _ 07/12	
	Grantee KATHL	EEN C MARTIN Date 07/12/2018 Gran					Date 07/12	
12. PREPARER	Name of Preparer	LAURA OVERSON	Phor	ne Number_	(603) 621-	1541		
	Mailing Address -	70 MARKET ST			loverson@	mssg.com		
		MANCHESTER NH 03101	E !	Mirror In or				

## **RETTD**

DLN: 1001840032514

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

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

•		Registry	Saga	dahoc	
	Date	Recorded	07/1	3/2018	
	Time	Recorded	09:2	4:00 A	<u>M</u>
Tran	isfer Ta	ax Amount	\$521	.40	
D	ocume	nt Number	2018	r-0461	5
		Book	2018		
		Page	4615		
	ВОО	K/PAGE—REG	ISTRY US	E ONLY	
(MI)	Ī	3b) SSN or Fede	ral ID		
(MI)	Ļ	3d) SSN or Fede	ral ID		
]	•	Ja, 3311 01 1 Cac			
J .		1	<b>-</b>		_
		3g) State		4530 Zip Code	
J		<b>39</b> /3tate	311)	zip code	
J (MI)	Ĺ	4b) SSN or Fede	ral ID		
(MI)	4	4d) SSN or Feder	ral ID		
]					
		ME	$\int_{0}^{\infty}$	4086	
		4g) St		4h) Zip Coo	le
	ty being <b>s</b>	he code numbe old. (See instruc		502	
tax maps of Itiple parce		0.00		7	
tion of par		5d) Acreage			
6a	\$118	3,500			.00
		· · · · · · · · · · · · · · · · · · ·			00
6b	_				.00
exemptio	n from tr	ansfer tax and	l explain	•	
		e, Tree Growth		_	
developm	ient, sub	division, parti	tion or cl	hange in i	
THHELD-	Buyer(s)	not required	to withh		
Seller has		tax because: d as a Maine r	esident		
7		received fror			
Consider   Foreclost		the property	is iess th	an \$50,00	U
		amined this re			
THANN		agent(s) are r NCE	equired Date.	07/16/	
			Date	07/16/2	

Sagadaho	c							Do	cumen	ıt Nıı	mber 2	2018	r_0461	15
1. County								<b>D</b> 0.	Cumon				1 040	1.5
BATH					]						Book _2			
2. Municipality	/Township				J						Page _	4615		
3. GRANTEE/									BOOK	(/PAGI	REGIS	TRY US	E ONLY	
PURCHASER	SPENCE		RUTHA	NNE										
	3a) Name (LAST)		(FIRST)	TAINE				(MI)	<u>L</u> 3	b) SSN	or Federal	ID		
												•••		
	3c) Name (LAST)		(FIRST)					(MI)	<b>L</b> 3	d) SSN	or Federal	ID		
	42 PINE HII	LL DR												
	3e) Mailing Address									. –		, <sub>—</sub>		
	BATH										ME	02	1530	
	3f) City									30	g) State	3h)	Zip Code	
4. GRANTOR/ SELLER	LAVALLEY	Y	MICHE	LLE				J						
	4a) Name (LAST)		(FIRST)					(MI)	4	b) SSN	or Federal	ID		
	4c) Name (LAST)		(FIRST)				_	(MI)	4	d) SSN	or Federal	ID		
	331 CATHA	NCE RD												
	4e) Mailing Address									. –				
	TOPSHAM										ME	04	1086	
	4f) City										4g) State		lh) Zip Co	de
5. PROPERTY	31		51-42			descri	ibes the pr	operty			number the instructio		502	
	5a) Map	Block	Lot	Sub-Lot	Ch		any that a							
	42 PINE HII	LLRD				_	No tax ma Multiple p	•			.00			
	5c) Physical Location				[	P	ortion of	parce	d	5d) Ac				
6. TRANSFER TA	X 6a) Purchase	Price (If the transf	fer is a gift. e	nter "0")				6a [	\$118.	500				.00
		et Value (enter a v	_		"in 6a) o	r		"" [.	<b>711</b> 0,					] 1
		nominal value)	arac omy m	you cincicu o	iii ou, o	•	(	6b						.00
	6c) Exemption	claim – Check	the box if eith	her grantor or gr	antee is cl	laimii	na exem	ntion 1	from tra	nsfer	tax and e	xplain.		•
		L.J		3 9.										
7 DATE OF TRA	NSFER (MM-DD-YYY	V) 0 WA DAUL	IC TO DINCE	16.3	1 10		. , ,				~ .1			
07	12 2018	<del></del>		If the property is ial penalty could										
MONTH	DAY YEAR												CLASSI	FIED
	UMSTANCES—Were t				INCOME	TAX	WITHHE					withho	old Maine	9
	hich suggest that the set value? If yes, check	•		s <b>1</b>		ı	X Selle		come to		ause: Maine res	ident		
			<u> </u>	1							ed from t		te Tax As	sessor
							_			the pr	operty is	less tha	n \$50,00	00
11. OATH	Aware of penalt	ies as set forth by T	Fi+lo 26 84641	K wa harabu su		- I		losure			thic rots		4 - 4 - 1 - 1	+ -£
71.07111	our knowledge and	d belief, it is true, co	rrect, and cor	nplete. Grantee(	s) and Gra	intor(	(s) or the	ir auth	orized	agent	(s) are req	m and Juired t	o sign be	est or elow:
	Grantee MICHE	ELLE J LAVALI		07/16/2018	Grantor	_R	UTHA	NNE	SPEN	<b>ICE</b>			07/16/	
	Grantee		Date	07/16/2018	Grantor	_						Date	07/16/	2018
12. PREPARER	Name of Preparer		·				one Num							
	Mailing Address	PO BOX 177				E-N	Aail Addr	ess _	mmw@	casco	baytitle.co	om		
		BRUNSWICK, I					Numbei							
		http://www.m	aine.gov/reve	enue/propertyta	ax/transfe	rtax	/transfer	tax.ht	m					

## **PROCESSED** ONLINE.

DLN: \_1001840032535

## **MAINE REVENUE SERVICES**

Registry Sagadahoc

DO NOT	RE-PROCES	S RE	AL ESTATE TRA		<b>(</b>	Date Recorded	07/13/2018	3
	TTD		<b>DECLARA</b> 36, M.R.S.A. SECTIO		- 41 1	Time Recorded	10:29:00 A	M
		Inte	50, W.K.S.A. SECTIO	N3 994041-40	Trai	nsfer Tax Amount	\$0.00	
Sagadaho	С				D	ocument Number	2018r-0462	24
1. County						Book	2018	
BATH							4624	
2. Municipality	//Township					BOOK/PAGE—REC		
3. GRANTEE/ PURCHASER	3a) Name (LAST)	EDER LIVIN	VING TRUST D (FIRST) IG TRUST DAT (FIRST)		(MI)		eral ID	
4. GRANTOR/	3f) City					3g) State	3h) Zip Code	
SELLER	SKERNICK 4a) Name (LAST)  FEDER 4c) Name (LAST)  944 MIDDL 4e) Mailing Address  BATH		LINDA (FIRST)  YVES (FIRST)		(MI) A (MI)	4b) SSN or Fede  4d) SSN or Fede  ME		
	4f) City					4g) St	ate 4h) Zip Co	de
6. TRANSFER TA	6a) Purchase I 6b) Fair Marke if 6a) was of n	Price (If the trans at Value (enter a v ominal value)	fer is a gift, enter "0") /alue <b>only</b> if you ente	ered "0" in 6a) or	describes the proper eck any that appl No tax maps of Multiple parc Portion of par	exist els 0.27 5d) Acreage \$0 \$426,200	202	00. [
		<del></del>	the box if either granto		aiming exemptio	n from transfer tax and	d explain.	
Deed into	trust pursuant t	o Title 36 M	RSA Section 46	51-C(15)				
9. SPECIAL CIRC in the transfer w than its fair mark	O6 2018  DAY YEAR  CUMSTANCES—Were the suggest that the part of the suggest value? If yes, check	front a sub here any special cir orice paid was eith the box and explai	er more or less in:	ty could be trigge	FAX WITHHELD  Seller has A waiver X Consider. Foreclosu	Buyer(s) not required income tax because: s qualified as a Maine r has been received fror ation for the property are Sale	tion or change in  CLASSI to withhold Maine esident n the State Tax As: is less than \$50,00	e sessor
11. OATH	Aware of penalti our knowledge and	es as set forth by it I belief, it is true, co	<b>Fitle 36</b> §4641-K, we he orrect, and complete. G	reby swear or affi rantee(s) and Grar	rm that we have ntor(s) or their au	each examined this re thorized agent(s) are r	turn and to the be equired to sign he	est of elow:
	Grantee LINDA	SKERNICK	Date	2018 Grantor		ERNICK LIVING		
40 00	Grantee	FEDER	Date	2018 Grantor	YVES A. F	EDER LIVING T	RUST DOVIN	<b>20281</b> 6/20
12. PREPARER	Name of Preparer .	TONI MEAD	D CLUTTE 400		Phone Number			
	Mailing Address	6 CITY CENTE			E-Mail Address	tmead@hablaw.com		
	•	PORTLAND, M	IL 04101		Fax Number			

Merits: 0011863767114 Trips: 7182400670029



## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	IIII IIII IIIII IIII IIII IIII IIII IIII	m ool	DECLAR		^	_	
	TTD		36 M.R.S. §§ 46			11318	1:43P.M
1. County						2018R-3	34/252
SAGADA	HOC					Transfer'	Tax of
2. Municipalit	y/Township				<del>-</del>	State of Maine '	ranster Tax
BATH						345404000000000000000000000000000000000	4652)
3. GRANTEE/						BOOK/PAGE—REGIST	/
PURCHASER	3a) Name LAST or BUS CORNER I						<del></del>
	3c) Name. LAST or BUS	iness. First. M	íl.				
	3e) Mailing Address af 71 SOUTH	ter purchase of STRE	this property ET				
	31) City BATH					3g) State ME	301217 Code 04530
4. GRANTOR/ SELLER	4a) Name, LAST or BUS					-	
SELLER	HILL, RI						
	4c) Name, LAST or BUS	MINESS, FIRST, M	А				
	4e) Mailing Address 71 SOUTH	STRE	ET				
	4f) City					4g) State	4h) ZIP Code
	BATH					ME	04530
5. PROPERTY	5a) Map	Block	Lot	Sub-Lot	Ch) Transferences	Enter the code number th	- L
5. PROPERT	32	DIVER	158		describes the property neck any that apply No tax maps e	y being <b>sold.</b> (See instruction /:	at pest ns)—» 303
	5c) Physical Location				Multiple parce	• •	
	653-655 N	T DDTF	STREET		Portion of parc		•
6. TRANSFER TA	6a) Purchase	Price (If the	transfer is a gift, enter "C	)")	ба		0.00
	6b) Fair Marke if 6a) was of n		ter a value <b>only</b> if you er ie)	ntered "0" in 6a) o	r 6b	1	47800 <b>.00</b>
	6c) Exemption	claim- ✓	Check the box if either gra	ntor or grantee is c	laiming exemption	from transfer tax and ex	plain.
36 M.R.S. S	SECTION 4641-C(1	6) DEED F	ROM SHAREHOLDER TO	FAMILY CORPOR	RATTON .		
	ANSFER (MM-DD-YYY	<u> </u>	ARNING TO BUYER-If the p			n Space, Tree Growth, or	Working Water-
07-13- MONTH	2018 DAY YEAR		t a substantial financial pen				
9. SPECIAL CIRC	UMSTANCES-Were t	here any spe	cial circumstances	10. INCOME		Buyer(s) not required to v	withhold Maine
	vhich suggest that the ket value? If yes, check					ncome tax because: qualified as a Maine resi	dent
nee	n provi cumpruoti	100 ma 621	ILY CORPORATION.			as been received from the	
DEE	D INON SHARMODE	DER TO PAR	HIBI CORPORATION.			tion for the property is l	ess than \$50,000
44.04774					Foreclosus		
11. OATH	Aware of penalti our knowledge and Grantee	ies as set for d belief, it is t	th by 36 M.R.S. § 4641-K, w puts, correct, and complete. Date 7/1	e hereby swear or Grantee(s) and Gra 13/18 Grantor	ntor(s) or their aut	horized agent(s) are requ	uired to sign below:
	Grantee	- J	Date	Grantor	, ,		Date
12. PREPARER	Name of Preparer	ROGER R. TH	ERRIAULT, ESQ.			207) 443-5182	
<u> </u>	Mailing Address	48 FRONT S	TREET			therriault@tlawmaine.co	m
	-	BATH, ME	04530			(207) 443-5363	

Rev. 12/15

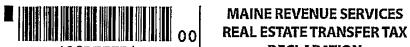
http://www.maine.gov/revenue/propertytax/transfertax/transfertax.htm

Merits: 0011863766216 Trips: 7182400670033



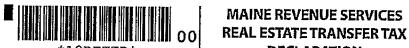
RE	TTD	TITLE 36, M.R.S.A. SECTIONS §§464	1-4641N		
1. County				07/16/2018 09:16 AM	
SAGADA	HOC			<b>2018R-04661</b> Transfer Tax of 550,00	
2. Municipality	y/Township			State of Maine Transfer Tax	
BATH				SAGADAHOC COUNTY MAINE	
3. GRANTEE/		The state of the s		BOOK/PAGEREGISTRY USE ONLY	
PURCHASER	3a) Name LAST or BU	SINESS, FIRST, MI			
	LONGO,	ROBERT A.		]	
	ILONGO,	siness eirst mi SUSAN K.		]	
	3el Mailing Address	JODAN II.		J	
	6 FISHER	COURT			
	3f) City BATH			391.5tate 311.410.500e ME 04530	
4 CRANTOR!	4a) Name, LAST or BU	CINICC FIRST M		ME 04530	┵.
4. GRANTOR/ SELLER	HARADEN			)	
	4s) Name LAST or BU			J -	
	4e) Mailing Address			,	
	6 FISHER	COURT		· · · · · · · · · · · · · · · · · · ·	
	4f) City			4g) State 4h) Zip Code	
	BATH			ME 04530	
5. PROPERTY	5a) Map 27	Block Lot Sub-Lot		—Enter the code number that best ty being sold. (See instructions)—>	_
	21		Check any that apply		
	5c) Physical Location		No tax maps e Multiple parce		-,
	6 FISHER	COURT	Portion of parce	1	
6. TRANSFER TA	IX 6a) Purchase	Price (If the transfer is a gift, enter"0")	6a	125000	00
			Ĺ	123000	.00
		et Value (enter a value <b>only</b> if you entered "0" in 6 nominal value)	6b		.00
	бс) Exemption	claim – Check the box if either grantor or grantee	_ is claiming exemption:	from transfer tax and explain.	1
7. DATE OF TRA	NŞER_(MM-DD-YYY	Y) 8. WARNING TO BUYER-If the property is class	ifind as Farmland One	on Change Trans Country and the Market	<u></u> i
07-13		front a substantial financial penalty could be to	riggered by developm	ent, subdivision, partition or change in us	e.
MONTH	DAY YEAR			CLASSIFIE	ξD
		there any special circumstances 70. INCO price paid was either more or less		Buyer(s) not required to withhold Maine	
		k the box and explain:	·—.	ncome tax because: qualified as a Maine resident	
			A waiver h	as been received from the State Tax Asses	ssor
				tion for the property is less than \$50,000	
			Foreclosu		
1.OATH	Aware of penalt our knowledge an	ties as set forth by Title 36 §4641-K, we hereby swear o d belief, it is true, correct, and complete. Grantee(s) and	r affirm that we have e Grantoris) or their sur	each examined this return and to the best horized agent(s) are required to sign below	of w:
	Kolu	1-A I 12-709.	ntor WK	Date 7/13	18
	(Grantee Sux	2 KBunp Date 7-13-18 Gran	-	Date	
2. PREPARER	Name of Preparer	Daniel T. Rush, P.A.	Phone Number_	(207) 985-9850	
	Mailing Address	124 Fletcher Street, Kennebunk, ME 04043	E-Mail Address _	closings@rushlaw.us	
			Fax Number	(207) 985-9029	
		http://www.maine.gov/revenue/propertutay/tra-	nefortav/tranefortav k	itm	

Merits: 0011863766718 Trips: 7182400670037



	12RETTD*		DECLARATION		( ~	~	
	TTD	36	M.R.S. §§ 4641-464	·	7116	118 8	207 P.M
1. County						218R-C	_ /
SAGAD	AHOC					Transfer T	· · /~
2. Municipality	//Township					e of Maine T	ransfer Tax
BATH					SAGA	DAHOC CO	UNTY MAINE
3. GRANTEE/ PURCHASER			<del></del>		воо	K/PAGE—REGISTI	RY USE ONLY
	3a) Name LAST or BUSIN PETERS, J 3c) Name LAST or BUSIN 3b) Mailing Address afte 141 MAIN S 3f) City SOUTH PC	IAMES R. NESS.FIRST.M I purchase of this property STREET			,	3g) State_ ME	_3111215 Code
4. GRANTOR/ SELLER	4a) Name, LAST or BUSH DONAL CO 4c) Name, LAST or BUSH 4e) Malling Address 141 MAIN S	, INC. NESS, FIRST, MI			:		
	40 City SOUTH PC					4g) State	4h) ZIP Code 04106
5. PROPERTY	20 5ct Physical Location 25 DRUMMO	DND POINT	332	describes t Check any t No ta	he property being s	the code number that told. (See instructions 5d) Acreage	t best
6. TRANSFER TA	6a) Purchase P 6b) Fair Market if 6a) was of no	minal value)	a gift, enter "0") conly if you entered "(		6a 6b		.00 45000 .00
owner to indidi		dant v, Check the	box il elitiei giantoi oi gi	ontee is claiming e	xemption nom ti	ansier tax and exp	Jan
7. DATE OF TRA	ANSFER (MM-DD-YYYY  13 2018  DAY YEAR		BUYER-If the property it all financial penalty coul				
in the transfer w	CUMSTANCES—Were the which suggest that the parties that t	rice paid was either mo		ر <sub>ا ا</sub> ا	income Seller has qualifie Waiver has beer	tax because: d as a Maine resid	ent e State Tax Assessor
11. OATH	Aware of penaltie our knowledge and Grantee Grantee	es as set forth by 36 M, heller, it is true, correct	R.S. § 4641-K, we hereby , and complete. Granteg Date 7.13-18	swear or affirm tha	at we have each	agent(s) are requ	im and to the best of ired to sign below: Date 7-/3-/8
12. PREPARER		IRST CHOICE TITLE CO.		Phone N	Number <sup>207-222-29</sup>		
_		BO MAIN STREET		Email A			
		GORHAM, ME 04	1038	Fax Nur			
Rev. 12/1	15	http://www.maine.	gov/revenue/propertyt	ax/transfertax/tran	sfertax.htm		

Merits: 0011863766517 Trips: 7182400670035



	*****		חברו ל	ARATION	~~				
	TTD			4641-4641N					
1. County			50 141.1.5. 33	3 4041-404114				8 02:17 PM	
SAGAD	AHOC		-					-04685 *-6-266.00	
2. Municipalit			<del>-</del> -			,	State of Main	E Transfer Tax	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					(	SAGADAHOC C X I A C	- 4685	)
BATH							_		/
3. GRANTEE/ PURCHASER	3al Name LAST of BU FIN, LLC 3cl Name LAST of BU 3el Mailing Address a	ISINESS, FIRST,	of this property.			BOO	«√ <del>Pāge—Regis</del>	TRY USE ONLY	
	60 SEAVE BUXTON	Y DRI	/E				agi State_ ME	_\$1172117_Code	
4. GRANTOR/ SELLER	4a) Name, LAST of BU SEWELL, 4c) Name, LAST of BU	MICHA ISINESS, FIRST, I	AEL L. JR.					- = =	
	80 DRAYT 40 City BATH	ON RO	JAD				4g) State	4h) ZIP Code 04530	
5. PROPERTY	39 5c) Physical Location 29 WASHIN	Block	STREET	Sub-Lot ,	describes the Check any tha No tax i	maps exist e parcels	e code number th ld. (See instruction 5d) Acreage	at best	
6.TRANSFERTA	AX				1 17 01 (101)	or parcer (		<u> </u>	<u>!</u>
		et Value (er	transfer is a gift, ente ster a value <b>only</b> if you sel	•	or	6a		00000	00 
	·		Check the box if either	orantor or grantee is	cialmina ava		nefortay and a		_
			Check the DOX is cities	giantoi oi giantee is	Claiming exe	inpuon nom ua	nsier tax and ex	plain.	
07-13- MONTH	ANSEER_IMM_DD_YYY 2018  DAY YEAR CUMSTANCES—Were	fron	/ARNING TO BUYERif the tassubstantial financial	penalty could be trig	gered by dev	elopment, subd	ivision, partitio	or change in use, CLASSIFIE	
in the transfer w	hich suggest that the	price paid w	as either more or less	- 10. INCOM			x because:		
than its fair mar	ket value? If yes, checl	k the box and	explain:	!	!   Aw		eceived from th	dent ne State Tax Assess ess than \$50,000	or
11. OATH	our knowledge an Grantee	ties as set for	th by 36 M.R.S. § 4641-k rue, correct, and comple	K, we hereby swear or te, Grantee(s) and Gr //3/18 Granto	antor(s) or th	ve have each ex	gent(s) are requ	urn and to the bes lired to sign below Date #/3/	t of
12. PREPARER	Grantee	FIRST CHOICE	Date	Granto	r	/		Date	_
AMPINIA Idea of the com-	Name of Preparer	80 MAIN S		· <del></del>	Phone Nur		1		-
	Mailing Address	GORHAI	M, ME 04038		Email Add				
									-

Rev. 12/15

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

DLN: 1001840032749

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

 Registry
 Sagadahoc

 Date Recorded
 07/16/2018

 Time Recorded
 03:14:00 PM

 fer Tax Amount
 \$0.00

RE'	ΓTD	TITLE 3	86, M.R.S.A. SEC	CTIONS §§	4641-4	4641N			e Recorded			<u>M</u>
Cagadaha						-	Trai	isfer T	ax Amount	\$0.00	<u>)                                    </u>	
Sagadaho  1. County							D	ocume	ent Number	2018	<u>r-0469</u>	<u> 22 </u>
ВАТН					7				Book	2018		
2. Municipality	Township				J				Page	4692		
3. GRANTEE/	Township					_		ВО	OK/PAGE—REC		*	
PURCHASER						ļ					<del></del>	
	HATCH		KELLY				F					
	3a) Name (LAST)		(FIRST)				(MI)		3b) SSN or Fede	ral ID		
	3c) Name (LAST)		(FIRST)				(MI)		3d) CCN on Fords	LID		
	71 COURT S	TREET	(11131)		<del></del>		] (,,,,,		3d) SSN or Fede	raiiD		
	3e) Mailing Address	IKEEI					_					
	BATH								ME		1520	
	3f) City					=			ME 3g) State		1530 Zip Code	
4. GRANTOR/									3g/ state	5(1)	zip Code	
SELLER	CITY OF BA	.TH	(5)057)									
	4a) Name (LAST)		(FIRST)				(MI)		4b) SSN or Fede	ral ID		
	4c) Name (LAST)		(FIRST)				(AAI)		4 P. CCM . 5 . 1			
	55 FRONT S	TDEET	(inist)				[MI)		4d) SSN or Fede	ral ID		
	4e) Mailing Address	TREE!					]					
			-						7 7 7 7 7			
	BATH								ME ME		1530	
5. PROPERTY	4f) City					Flat Torre			4g) St		4h) Zip Coo	de
	28		94	İ		describe	s the proper	ty being	the code numbe <b>sold.</b> (See instruc		202	
	5a) Map	Block	Lot	Sub-Lot		_	y that appl tax maps (	•			<u> </u>	
	71 COURT S	TREET				☐ Mu	ltiple parc	els	0.17			
	5c) Physical Location					☐ Por	tion of par	cel	5d) Acreage			
6. TRANSFER TA	X 6a) Purchase Pi	rice (If the transf	fer is a gift, ente	r "O")			6a	\$0				.00
	6b) Fair Market	Value (enter a va	alue <b>only</b> if you	entered "0	" in 6a)	or		<b></b>				] ]
	if 6a) was of no	minal value)					6b	\$140	5,000			.00
		laim – \overline X Check						n from t	ransfer tax and	l explain.		
Municipal	quitclaim deed	to resolve m	ature utility	liens, bo	oth par	rties e	xempt					
7. DATE OF TRA	NSFER (MM-DD-YYYY)		I <b>G TO BUYER</b> –If th	ne property i	s classifie	ed as Far	mland, Op	en Spac	e, Tree Growth	, or Worki	ng Water	r-
07	09   2018	front a subs	stantial financial p	penalty coul	d be trig	gered by	developm	ent, sub	division, parti	tion or ch	-	
MONTH	DAY YEAR						-				CLASSIF	
	UMSTANCES—Were the hich suggest that the pi			10.	INCOME	E TAX WI			not required tax because:	to withho	ld Maine	!
	et value? If yes, check t					Г	-		ed as a Maine r	esident		
			_						n received fror			
						⊢	Consider Foreclosu		the property	is less tha	n \$50,00	0
11. OATH	Aware of penaltie	s as set forth by T	<b>itle 36</b> §4641-K. v	ve hereby sv	vear or a	ffirm tha	t we have	each ex	amined this re	turn and	to the be	est of
	our knowledge and i	belief, it is true, coi	rrect, and comple	ete. Grantee(	s) and Gr	rantor(s)	or their au	thorized	l agent(s) are r	equired t	o sign be	elow:
	Grantee CITY O	∃BATH		7/16/2018	Granto	r <u>KE</u>	LLY F H	IATCI	I		07/16/2	
40.00=	Grantee			7/16/2018	Granto					Date _	07/16/2	2018
12. PREPARER	Name of Preparer _	EDWARD LANG							775-6223 Ext			
	Mailing Address	707 SABLE OAK	AND ME 04106			E-Mai	l Address	elange	@logs.com			
		STREET BY 1D.L.I.	AND MEDIATOR									

DLN: 1001840032815

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

Registry Sagadahoc Date Recorded <u>07/17/2018</u> Time Recorded 11:34:00 AM

RE	TTD	TITLE 3	6, M.R.S.A. S	ECTIONS §§464	1-46411	٠ <u> </u>	c	recorded	#206	70	TIAT .
Sagadaho	200					İ		x Amount			
1. County	<del></del>					D	ocumen	t Number	2018	<u>ir-047</u>	<u>00</u>
BATH						1		Book	2018	;	
2. Municipality	u/Township							Page	4700	)	
3. GRANTEE/	y/ TOWITSTIIP					4	ВООК	/PAGE—REGI			
PURCHASER	LAFOGGE		A T TOT A			2.5				_	
	LAFOSSE 3a) Name (LAST)		ALICIA			<b>M</b> (MI)	31	o) SSN or Feder	al ID		
			· · · · · · · · · · · · · · · · · · ·			(/***/	Ĩ	<i>5, 55,</i> 1 6,1 CGC	<u> </u>		
	3c) Name (LAST)		(FIRST)			(MI)	30	d) SSN or Feder	al ID		
	19 BEDFOR	RD STREET,	APT 2								
	3e) Mailing Address										
	BATH							ME	04	4530	
	3f) City							3g) State	3h)	Zip Code	
4. GRANTOR/ SELLER	FANNIE MA	AE A/K/A FF	EDERAL 1	NATIONAL N	4ORT	GAGE A	ssoc	IATION			
	4a) Name (LAST)		(FIRST)			(MI)	41	) SSN or Feder	IID		
							1				
	4c) Name (LAST)		(FIRST)			(MI)	40	l) SSN or Feder	IID		
	P.O. BOX 6:	50043									
	4e) Mailing Address		<del></del>					<u> </u>	¬ [		
	DALLAS							TX		5265-0	- 1
5. PROPERTY	4f) City				7 Eb) T	una of aranarti	. Entouth	4g) Sta e code number		4h) Zip Co	de
S. HOLLKI	26		37 &am	np; 36	descri	bes the proper	ty being <b>so</b>	<b>ld.</b> (See instruct		202	
	5a) Map	Block	Lot	Sub-Lot		any that appl Io tax maps e	•				
	10 BEDFOR	D STREET			X	Aultiple parce	els	0.44			
	5c) Physical Location					ortion of par	cel	5d) Acreage		<u> </u>	
6. TRANSFER TA	AX 6a) Purchase I	Price (If the transf	er is a gift, en	nter "0")		6a	\$93,5	00			00.
	6b) Fair Marke	et Value (enter a v	alue <b>only</b> if y	ou entered "0" in 6	a) or						] ]
	if 6a) was of n					6b					.OC
	6c) Exemption	claim – Check	the box if eithe	er grantor or grantee	is claimii	ng exemptio	n from tra	nsfer tax and	explain		
7. DATE OF TRA	ANSFER (MM-DD-YYY)	() 8. WARNIN	G TO BUYER-II	f the property is class	sified as F	armland. Ope	en Space.	Tree Growth	or Work	ing Wate	
07	13 2018	front a subs	stantial financia	al penalty could be t	riggered	by developm	ent, subd	ivision, partit	ion or cl	hange in	use.
MONTH	DAY YEAR									CLASSI	
<ol><li>SPECIAL CIRC in the transfer w</li></ol>	<b>CUMSTANCES</b> —Were t which suggest that the <sub>l</sub>	here any special circ	cumstances er more or less	10. INCO	ME TAX \			ot required to x because:	o withho	old Maine	ā
	ket value? If yes, check				[			as a Maine re	sident		
			_			_		received from			
FNMA 1/	2 TRANSFER I	EXEMPT			i	Considera X Foreclosu		he property i	i less th	an \$50,00	)0
11. OATH	Aware of penalti	es as set forth by T	itle <b>36</b> §4641-ŀ	K, we hereby swear o	or affirm t	_		nined this ret	urn and	to the b	est of
	our knowledge and	d belief, it is true, co	rrect, and com	plete. Grantee(s) and	Grantor(	s) or their au	thorized a	igent(s) are re	quired	to sign be	elow:
	Grantee FANNI	E MAE A/K/A		07/17/2018		GECASSOO	CIANFIONO	<b>S</b> E		07/17/	
12. PREPARER	Grantee	IANAEC HODES		07/17/2018 Gra	ntor		(0.0		_ Date	07/17/	2018
14. FINEFAREK	Name of Preparer	JAMES HOPKIN 6 CITY CENTER				ne Number	(207) 77			<del></del>	
	Mailing Address	PORTLAND, MI					Juopkins	on@hablaw.c	OIII		
					гах	Number					

DLN: 1001840032797

Registry	Sagadahoc
Date Recorded	07/18/2018
Time Recorded	08:45:00 AM
ansfer Tax Amount	\$1,001.00
Document Number	2018: 04716

RE	TTD	TITLE 36	6, M.R.S.A. SE	CTIONS §§	4641-46	541N	Transfer Tax Amount \$1				
Sagadah	00										
1. County	-						D	ocument	t Number	2018r-0	<u>4716</u>
ВАТН					]				Book	2018	
2. Municipality	v/Township				_				Page	4716	
3. GRANTEE/	,,				_			воок	/PAGE—REG	ISTRY USE ON	1LY
PURCHASER	PERPIGNA	NO	KRISTIN (FIRST)			-	(MI)	3b	o) SSN or Feder	ral ID	
	NORRIS 3c) Name (LAST)		WILLIAM (FIRST)	I JEREM	Y		(MI)	30	l) SSN or Feder	ral ID	
	3 WEEKS S	TREET									
	3e) Mailing Address  BATH  3f) City								ME 3g) State	0453	
4. GRANTOR/ SELLER	MCKENNA 4a) Name (LAST)		SHANE (FIRST)				(MI)	4b	) SSN or Feder	al ID	
	MCKENNA 4c) Name (LAST)		KARI (FIRST)	#1.d			<b>M</b> (MI)	<u> </u>	) SSN or Feder	al ID	
	361 HIGH S	TREET									
	4e) Mailing Address										
	BATH								ME	0453	0
5. PROPERTY	4f) City								4g) Sta	ate 4h) Zi	ip Code
	5a) Map  3 WEEKS S'  5c) Physical Location	Block  FREET	076 Lot	Sub-Lot	1.	describes neck any No 1 Mul		rty being <b>sol</b> ly: exist els rcel	e code number d. (See instruc  0.13  5d) Acreage		02
6. TRANSFER TA	AX 6a) Purchase I	Price (If the transfe	er is a gift, ente	er "0")			6а	\$227,	500		.00
		t Value (enter a va	<del>-</del>		"in 6a) o	r	6b	Ψ227,			.00
	6c) Exemption	claim – Check	the box if either	grantor or gr	antee is cl	laiming	exemptio	n from trai	nsfer tax and	explain.	
07	ANSFER (MM-DD-YYYY)  17 DAY 2018 YEAR CUMSTANCES—Were ti	front a subs	G TO BUYER-If the stantial financial	penalty could	d be trigg	ered by	developn	nent, subdi	vision, partit	tion or chang	e in use. ASSIFIED
in the transfer v	which suggest that the parket value? If yes, check	orice paid was eithe	r more or less			_	Seller ha	income ta s qualified has been r ation for th	x because: as a Maine re eceived fron		x Assessor
11. OATH	our knowledge and	es as set forth by Ti I belief, it is true, cor MCKENNA	rrect, and comple	we hereby sv ete. Grantee(: 7/18/2018	vear or aff s) and Gra Grantor	ntor(s)	or their au	each exam thorized a ERPIGN	gent(s) are re	turn and to the equired to signate $_{ m Date}$	gn below:
		I MCKENNA		7/18/2018	Grantor	33711			NORRIS		
12. PREPARER	Name of Preparer .	CARLY JOYCE	Sacc		Clarkor		Number,				
	Mailing Address	970 BAXTER BL	VD SUITE 204						lsettlement.c	om	
		PORTLAND, ME	E 04103			Fax No	ımber				_

Merits: 0011863766621 Trips: 7182400670043



	12RETTD*	00	REAL ESTATE DECLA	TRANSFER T				2.41PM 04754
1. County				1011 101111				Tax of
SAGADA	AHOC						te of Maine	Transfer Tax OUNTY MAINE
2. Municipalit	ty/Township		-			GAG		1
BATH							2018-	4134
3. GRANTEE/ PURCHASER	3a) Name LAST or BI LUCAS,		TR. T			воо	RYPAGE—REGIST	RY USE ONLY
	3c) Name. LAST or BI	JSINESS, FIRST, MI						
	3e) Mailing Address 82 DENN	after purchase of th Y ROAD	is property					
	3f) City BATH						3g) State ME	30 4530
4. GRANTOR/ SELLER	4a) Name, LAST or Bt CITY OF							
	4c) Name, LAST or Bl	JSINESS. FIRST. MI						
	4e) Mailing Address 55 FRON!	T STREE	Т					
	4f) City BATH						49) State ME	4h) ZIP Code 0 4 5 3 0
5. PROPERTY	5a) Map 19 5c) Physical Location	Block	Lot 162	Sub-Lot	5b) Type of proper describes the proper Check any that app No tax maps	erty being s oly:	he code number tha old. (See instruction Sd) Acreage	t best s}—»
	82 DENNY	ROAD			Multiple par Portion of pa			•
6. TRANSFER T	AX 6a) Purchase	Price (If the tra	insfer is a gift, enter	"O")	ба			.00
		ket Value (enter nominal value)	a value <b>only</b> if you	entered "0" in 6a)	or 6b		1.1	L4645 <b>.00</b>
	6c) Exemption	ı claim− 🗸 Ch	eck the box if either gr	antor or grantee is	claiming exemption	on from tra	ansfer tax and exp	olain.
Quit Claim	Deed from Munic	cipality Bac	k to Delinquent	Taxpayer				
	ANSFER (MM-DD-YY) 9-2018 DAY YEAR		NING TO BUYER-If the substantial financial pe	property is classified along the property is classified and the property in the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is classified as a second control of the property is control of the property in the property is control of the property is control of the prop	ed as Farmland, Op gered by developr	oen Space, ment, subc	, Tree Growth, or \ division, partition	Working Water- or change in use. CLASSIFIED
9. SPECIAL CIRC in the transfer v	CUMSTANCES—Were which suggest that the ket value? If yes, chec	price paid was e	ither more or less	10. INCOM	ETAX WITHHELD- Seller ha	income t	not required to w ax because: I as a Maine resid	ithhold Maine
					A waiver	has been	received from the	e State Tax Assessor
					✓ Consider Forectos		the property is lea	ss than \$50,000
11. OATH	Aware of penal our knowledge an Grantee	ties as set forth b ad belief, it is true	y 36 M.R.S. § 4641-K, , correct, and complete Date	we hereby swear o e. Grantee(s) and G Grante	rantor(s) or their a	ve each ex	agent(ş) are requi	rn and to the best of ired to sign below: late 7/9/18
	Grantee		Date	Granto	11/2/2/2	Ad		ate 7/9/18
12. PREPARER	Name of Preparer	Christopher F. Log	<u> </u>		Phone Number	401-272-14	00; ext. 3049	
_	Mailing Address	Shechtman Hal	perin Savage LLP		Email Address	clogan@	shslawfirm.com	
		1080 Main S	treet, Pawtucket, F	RI 02860	Fax Number	401-272-	1403	

Rev. 12/15

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

Merits: 0011863767022 Trips: 7182400670045

	12RETTD*	MAINE REVENUE SER REAL ESTATE TRANSF DECLARATION	ERTAX			4773
1. County	110	TITLE 36, M.R.S.A. SECTIONS §§	4641-4641N			11:21 A-N
SAGADA	HOC		İ	2	218 K- (	24773
2. Municipality					Transfer	
BATH						Transfer Tax OUNTY MAINE
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRS QUINN, JOHN 3CL Name LAST of BUSINESS, FIRS	JAMES		во	OK/PAGE—REGIS	FRY USE ONLY -
	29 Mailing Address [2350 SE HARR 30 City [PORT ST. LUC	INGTON TE				[34952
4. GRANTOR/ SELLER	4a) Name, LAST or BUSINESS, FIRST CITY OF BATH 4st. Name. LAST or BUSINESS, FIRST 4e) Malling Address 5 FRONT STR	, MI			FL	34932
r poorest	40 City BATH				49) State	04530
5. PROPERTY	5a) Map Block  4  5c) Physical Location  MALLARD ROA	Lot Sub-Lot  9  D	Check any	e of property—Enter is the property being a that apply: tax maps exist tiple parcels ion of parcel	the code number the sold. (See instruction 5d) Acreage	atbest 101 13)→ 101
6.TRANSFERTA	( 6a) Purchase Price (If th	e transfer is a gift, enter "0")				^ ^
		nter a value <b>only</b> if you entered "0" i	in 6n) ou	ба		0.00
	n oa) was of nominal va	lue)		6Ъ	18,	5,00,00
V = 0 > -1.		Check the box if either grantor or gran	tee is claiming o	exemption from tr	ansfer tax and exp	olain.
7. DATE OF TRAN MONTH 9. SPECIAL CIRCU	ISFER (MM-DD-YYYY) 8.1  2 2018 from DAY YEAR  MSTANCES—Were there any so	WARNING TO BUYER—If the property is on the assubstantial financial penalty could be called the country to the c	e triggered by o	land Ones Space	division, partition	or change in use.  CLASSIFIED
in the transfer wh than its fair marke	ich suggest that the price pald w it value? If yes, check the box an	ras either more or less dexplain:		income t Seller has qualifier A waiver has been Consideration for Foreclosure Sale	ax because: d as a Maine resid received from the the property is les	ient e State Tax Assessor ss than \$50,000
11. OATH	Aware of penalties as set fo our knowledge and belief, it is Grantee	rth by Title 36 §4641-K, we hereby sweat toye, correct, and complete. Grantee(s) a Date 4/28/18/00	er or affirm that and Grantor(s) of Grantor	we have each exa their authorized	agent(s) are requi	and to the best of ired to sign below:

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

Phone Number 207-388-0400

E-Mail Address djackson@hablaw.com

Hopkinson & Abbondanza, P.A.

746 High Street

Bath, ME 04530

12. PREPARER

Name of Preparer

Mailing Address

Merits: 0011863767223 Trips: 7182400670047

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*10nmmn+	1

## **MAINE REVENUE SERVICES**

	*12RETTD*	IIII oo	REAL	ESTATE TR DECLARA		TAX				
1. County	ETTD		TTTLE 36, M	.R.S.A. SECTION	ONS §§464	1-4641N			7/20/2018 2 <b>018R-</b>	
SAGAD	AHOC	-	_					•	Transfer Ta	
2. Municipali	ty/Township		<u> </u>	······································	<del></del>		-	/ .	_	DUNTY MAXNE
BATH				<del></del>			1	( 2	2018-	4774)
3. GRANTEE/ PURCHASER					<del>- 1- 1 </del>		-	BOOKIPA	NGE-REGIST	RY USE ONLY
		ONNA	Μ.		<del></del>					<del></del>
	PINE, J	R., J	AMES I	J -				1		
	3e) Malling Address						<del></del>			
	3f) City								-Airanin-	
4. GRANTOR/	4a) Name, LAST or B	ISINESS EIDET	RAT .							
SELLER	QUINN,		JAMES		·	·	ì			
	Act Name LAST of B	USINESS.FIRST	WL					,		
	de de de la companya				<del></del>			]		
	4e) Mailing Address 2350 SE	HARR	INGTON	_ AVENU	E	<del></del>				
	4f) City			<del></del>	•				4g) State	4h) Zip Code
	PORT ST	. LUC	IE						FL	34952
5. PROPERTY	5a) Map  4  5c) Physical Location  MALLAR	D ROA		Lot 5 9	ub-Lot	Check an	e of property—) es the property b y that apply: tax maps exis litiple parcels	eing so <del>id.</del> (S	de number that see instructions Acreage	→ {±U±
6.TRANSFERT	NV					Por	tion of parcel		<u> </u>	.30 ;
or invisored 1	6a) Purchase 6b) Fair Mari	ket Value (er	nter a value o	gift, enter "0") on <b>ly</b> if you ente		) or	6a		<u> 18</u>	500.00
	if 6a) was of			arif oldh o a ann a t			6b			0.00
		- ciuiii — ,	Cleck die bo	x if elther grante	or or grantee i	s claiming	exemption fro	om transfe	r tax and exp	lain.
MONTH	ANSFER (MM-DD-YY)   8 ZO18   DAY YEAR	fror	ica subsianua		perty is classif y could be trig	fied as Farr ggered by	nland, Open S development	pace, Tree , subdivisio	Growth, or Woon, partition o	/orking Water- or change in use.
n the transfer w	UMSTANCES—Were which suggest that the ket value? If yes, chec	price paid w	as either more	nces orless	10. INCOM	TAX WI	THHELD—Buy inco Seller has qua	me tax be	cause:	
							A waiver has i Consideration	been rece! n for the pi	ved from the	State Tax Assessor than \$50,000
1. OATH	Aware of penals	tes as set for	th by Title 36	§4541-K, we her	eby swear or:	affirm that	Foreclosure S We have each		thic rate -	and to the best of
	our knowledge an	d belief, it is	rue, correct, a	nd complete. Gr.	antee(s) and (	arantor(s)	reir author	ized agent	(s) are requir	ed to sign below:
	Grantee	2	<del></del>	Date 7/19	Oidi(0					ite //////8
2. PREPARER	Name of Preparer	Hopkinson & /	bbondanza, P.A		Giant		Number 207-3	86-0400	Da	
	Mailing Address	746 High St						kson@hat	w.com	
		Bath, ME				Fax Nu	mber			
		http://w	ww.maine.go	v/revenue/prop	ertytax/trans	fertax/tra	กรfertax.htm			

DLN: 1001840033242

Sagadahoc
07/23/2018
09:01:00 AM
\$1,317.80
2018r-04800
2018
4800
ISTRY USE ONLY

KE	עוו	TITLE 36, M.R.S.A. SEC	TIONS §§4641	-4641N i				
G 11					Tran	sfer Tax Amount	\$1,317.80	
Sagadaho	oc				D	ocument Number	2018r-048	00
1. County						Book	2018	
BATH							4800	
2. Municipality	r/Township					BOOK/PAGE—REG		
3. GRANTEE/ PURCHASER				ļ		DOORT AGE—NEC	JIJIKI OJE ONEI	=,
TORCHASER	CROSSCUP	ALLISON			DF	ζ		
	3a) Name (LAST)	(FIRST)			(MI)	3b) SSN or Fede	eral ID	-
	3c) Name (LAST)	(FIDCT)						
	3c) Name (LAST) 1491 WASH	(FIRST)				3d) SSN or Fede	eral ID	
	3e) Mailing Address	INGTON 51						
	BATH					ME	04520	
	3f) City		·····			ME 3g) State		
4. GRANTOR/	ROBERTS	DAMID			-		Jily Zip Code	***************************************
SELLER	4a) Name (LAST)	DAVID (FIRST)			T (Mi)	4b) SSN or Fede	aral ID	
	, ,	V,			(,,,,	45) 55N 01 Tede	ad ID	
	4c) Name (LAST)	(FIRST)			(MI)	4d) SSN or Fede	aral ID	
	234 EASTER	N PROMENADE, UNIT	Γ 5		] ` `	14, 55, 1040	TOTIE	
	4e) Mailing Address	, 01.12			J			
	PORTLAND					ME	04101	
	4f) City					4g) Si		ode
5. PROPERTY	13	54				/—Enter the code number ty being <b>sold</b> . (See instru		
	5a) Map	Block Lot	Sub-Lot	Check an	y that apply	y:	ctions)—» 202	
	1491 WASHI	NGTON ST			tax maps e Iltiple parce			
	5c) Physical Location	1101011 51			tion of pare	1 V.JT		
6. TRANSFER TA	X 6a) Purchase P	rice (If the transfer is a gift, enter	"O")		65	\$299,500		.00
		-		<b>\</b>	6a	\$299,300		<u></u>
	if 6a) was of no	: Value (enter a value <b>only</b> if you e ominal value)	entered U in ba	) or	6b			.00
	6c) Exemption c	laim – Check the box if either gr	rantor or granteo i	s claiming	Lovomotion	from transfortay an	d overlain	J
	os, zampuon e	eneek the box is entirely gr	rantor or grantee i	3 Clairining	exemption	THOM transfer tax and	a explairs,	
7 DATE OF TRA	NCCED (IAM DD 1999)							
07	$\frac{\text{ANSFER}}{20} \frac{(\text{MM-DD-YYYY})}{2018}$	8. WARNING TO BUYER-If the front a substantial financial pe	e property is classite enalty could be tri	fied as Far ggered by	mland, Ope developm	en Space, Tree Growth ent, subdivision, part	ı, or Working Wate ition or change in	r- use.
MONTH L	20 2018 DAY YEAR		•	,	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CLASSI	
9. SPECIAL CIRC	UMSTANCES—Were th	ere any special circumstances	10. INCON	ΛΕ TAX WI	THHELD-	Buyer(s) not required	to withhold Maine	e
	hich suggest that the p ket value? If yes, check t	rice paid was either more or less he box and explain:		Ī	_	income tax because: qualified as a Maine	recident	
	·	· L			-	nas been received from		sessor
				F	7	ation for the property	is less than \$50,00	00
11. OATH	Aware of penaltic	s as set forth by Title 26 84641 K	a harabu susar sa	- 65 4ls -	Foreclosu			
•	our knowledge and	s as set forth by Title 36 §4641-K, we belief, it is true, correct, and complete	e nereby swear or e. Grantee(s) and (	anirm tha Grantor(s)	or their aut	eacn examined this re thorized agent(s) are i	eturn and to the bore required to sign b	est of elow:
	Grantee DAVID	T ROBERTS Date 07/	/23/2018 Grant			OK CROSSCUP	Date 07/23/	/2018
	Grantee	Date	/23/2018 Gran	tor			Date07/23/	2018
12. PREPARER	Name of Preparer _	MARK WALTZ				(207) 798-4611		
	Mailing Address	PO BOX 177		_ E-Mai	l Address	mmw@cascobaytitle	:.com	

Merits: 0011863762618 Trips: 7182400660037

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*10ppmmp*	

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

	IMARIMINIMINIMINIMINIMINIMINIMINIMINIMINIMI	REAL ESTATE TO		X				
	TTD	TITLE 36, M.R.S.A. SECT		541N		97/24/201	8 02:08 PM	
1, County	· · · · · · · · · · · · · · · · · · ·			<del></del>		2018R-		
SAGADA	HOC					Transfer Ta		
2. Municipality	/Township		<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>				ETTERS(er Tax XOUNTY MASK	
BATH		**************************************	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		(	2018-	- 4891	)
3. GRANTEE/ PURCHASER	3a) Name LAST or BUSINESS, FIRS [PHUONG, VAN	T.MI			ВООКЛ	Page <del>- regist</del>	RY USE ONLY	
	3cl Name, LAST of BUSINESS, FIRS NGUYEN, TRU	LMI.						
	3el Mailing Address 101 RIVER RC	AD						
	31) City BRUNSWICK					ME	04011	
4. GRANTOR/ SELLER	43) Name, LAST OF BUSINESS, FIRS PAUS, DANIEI				<del></del>	•		
	4c) Name, LAST of BUSINESS, FIRS LANGORD, CHF	ISTIAN,			(			
	4e) Mailing Address 148 FULLER M	IOUNTAIN ROAI		negativiti and a second		1		
	4f) City PHIPPSBURG					4g)State ME	4h) Zip Coo 04562	
5.PROPERTY	5a) Map Block		·	5b) Type of property describes the propert neck any that apply No tax maps e	y being sold 'i	code number tha I, (See Instruction d) Acreage	it best	
[	5c) Physical Location 190 HIGH STRE	ET		Multiple parco	is T	Vieral de	***************************************	
6. Transfer ta	X 6a) Purchase Price (If t	ne transfer is a gift, enter "(	)°)	ба	***************************************	1;	15000	.00
	6b) Fair Market Value ( If 6a) was of nominal v	enter a value <b>only</b> if you er alue}	ntered "0" in 6a) o	r 6b				00,
	6c) Exemption claim -	Check the box if either gra	ntor or grantee is c	L aiming exemption	from trans	sfer tax and ex	plain.	
717							_	
7. DATE OF TRA J 07-20 MONTH	NSFER (MM-DD-YYYY) 8 -2018 fr	WARNING TO BUYER-If the point a substantial financial per	property is classified alty could be trigge	l as Farmland, Ope cred by developme	n Space, Tr ent, subdiv	ce Growth, or islon, partition	Working Water or change in u CLASSIF	nze <sup>r</sup>
in the transfer w	UMSTANCES—Were there any s hich suggest that the price paid set value? If yes, check the box a	was either more or less	10. jnçome	~~.	ncome tax			i
				y	tion for the		e State Tax Ass ss than \$50,00	
11.OATH	our knowledge and belief, it	orth by Title 36 §4641-K, we strue, correct, and complete.  Date 7-8	Grantee(s) and Gra O-2018 Grantor	irm that we have e ntor(s) or their aut	ach exami	ent(s) are requ	and to the be lired to sign be Date	ist of low:
12. PREPARER	Gidiller Funda A le	- Uale - Land	2-70/8 Grantof	8	07-442-7971		Date	
1-47 1 = 634] E 3[56 16]	108 From	Street, Bath, ME 04530		Lucius Maninei -		aveaking@cor	nçast.net	Proposition of the Control of the Co
E .	Mailing Address 1991101		<del></del>	Palding Montess **	07-442-79			<b>5</b>

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

## **PROCESSED** ONLINE.

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DLN: 1001840033558

## **MAINE REVENUE SERVICES**

Registry Sagadahoc

O NOT I	RE-PROCESS			TE TRANSF			Date F	Recorded _	07/25/2018	}
				LARATION			Time F	Recorded _	12:56:00 P	M
KE	ΓTD	TITLE	36, M.R.S.A.	SECTIONS §§	4641-46	41N Tra	ınsfer Tax	Amount	\$1,548.80	
Sagadaho	c					I	Document	Number	2018r-0492	 25
1. County					_			Book		
BATH								_		
2. Municipality/	/Township						BOOK/	Page _	STRY USE ONLY	
3. GRANTEE/ PURCHASER							00010	TAGE TIEGIS	JINI OSE ONEI	
	DEBORA B I	DIXON LIV		UST		4.4			. In	
	Sa) Name (LAST)		(FIRST)			(M	1) 30	SSN or Federa	טוו	
	3c) Name (LAST)		(FIRST)			(MI	) 3d	SSN or Federa	IID	
	6 MILL PON	D DRIVE								
	3e) Mailing Address								7	
	BATH 3f) City							ME	04530	
4. GRANTOR/	· · ·							3g) State	3h) Zip Code	
SELLER	BROADWAT  4a) Name (LAST)	ER	DANNY (FIRST)	(		D (M)		SSN or Federa	LID	
	BROADWAT	TP	ANGEL			H		331V OI TEUCIA		
	4c) Name (LAST)	LK	(FIRST)			(M	. —	SSN or Federa	IID	
	242 MIDDLE	ROAD								
	4e) Mailing Address							r	1 <del></del>	
	WOOLWICH							ME	04579	
5. PROPERTY	4f) City			1 1	1 5	b) Type of proper	tv—Enter the	4g) Stat		de
	23 5a) Map	Block	25	Sub-Lot	d	lescribes the prope eck any that app	erty being <b>sol</b> e			
				30D-E00	<del></del>	No tax maps				
	6 MILL PONI 5c) Physical Location	) DRIVE			<u> </u>	Multiple par Portion of pa	<sub>arcel</sub> L	1.20		
6. TRANSFER TA	X	: //£+  +	· · · · · · · · · · · · · · ·					d) Acreage		.00
	<ul><li>6a) Purchase Pr</li><li>6b) Fair Market</li></ul>		_		//:	ба	\$352,0	)UU		] .00
	if 6a) was of nor		value only II	you entered t	in oa) or	6b				.00
	6c) Exemption cl	aim – 🔲 Chec	k the box if eit	her grantor or gr	antee is cla	aiming exempti	on from tran	sfer tax and	explain.	•
									·	
7. DATE OF TRA	NSFER (MM-DD-YYYY)	8. WARNII	NG TO BUYER-	-If the property i	s classified	as Farmland, O	pen Space, T	ree Growth, o	or Working Wate	r-
07	25 2016	front a sub	ostantial financ	cial penalty coul	d be trigge	red by develop	ment, subdi	vision, partiti		
MONTH SPECIAL CIRC	DAY YEAR UMSTANCES—Were the	ere any special ci	rcumstances	10	INCOMET	VA MILHEI D	- Privar(s) no	at required to	CLASSI withhold Maine	
n the transfer w	hich suggest that the pr	ice paid was eith	ner more or less		IIICOIVIL I		income tax	k because:		=
nan its fair mark	ket value? If yes, check th	e box and expla	<sup>In:</sup> L	J		<b>—</b>		as a Maine re: eceived from	sident the State Tax As	sessor
						Conside	ration for th		less than \$50,00	
I1. OATH	Aware of population	as set forth his	Ti+lo 26 84641	-K we harabu	MOST OF SEC		sure Sale	inad this as	um and to the t	ost of
•	<b>Aware of penalties</b> our knowledge and b	pelief, it is true, co	orrect, and cor	mplete. Grantee(	s) and Grar	ntor(s) or their a	uthorized a	gent(s) are re	quired to sign b	elow:
		D BROADW	A EEED	05/05/0010	Grantor		B DIXO	N LIVING	TB44ST07/25/	2018
12. PREPARER	Grantee	H BROADWA	Date	07/25/2018	Grantor		(202) 22	2.5045	Date 07/25/	2018
12. FILLEMALA	Name of Preparer Mailing Address	JAMES HOPKI 6 CITY CENTE		11		Phone Number		2-5845 on@hablaw.c	om	
	ivialing Address	PORTLAND, M				E-Mail Address	Jaspanio		~^^^	

Merits: 0011863763833 Trips: 7182400660067



### **RETTD**

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

		00	DE	CLARATION		712	110 =	2.20 Du	
	99900*		TITLE 36, M.R.S.	A. SECTIONS 46	541-4641N	1 100	2110 -	3:29PM 4968	
R	ETTD		PLEASE TYPE	OR PRINT C	LEARLY	1 2	つ18 <b>ほ</b> の	4768	
1. COUNTY		*	DO NO	T USE RED IN	ıki	1	Transfer T	ex of ( )	
SAGADA	HOC			!\		Stat	e of Maine Ti	ranefer Tex	
						SAG	LUANOG COL	JNTY MAINE	
	TY/TOWNSHIP					1 1	2018-	4968)	
BATH				<u> </u>		B)	DOK/PAGE—REGIS	TRY USE ONLY	
3. GRANTEE/ PURCHASER	3a) Name (LAST, FIRS GEARY - S 3c) Name (LAST, FIRS	EIĢA	RS, CAITL	ļŊ , , , ,	1 1 1				
	3e) Mailing Address 39 OFFIC 3f) City BATH	CE.D	RIVE,				3g) State ME	- 3h) Zip Code 04530	
4. GRANTOR/ SELLER	4a) Name (LAST, FIRS SEIGARS 4c) Name (LAST, FIRS 4c) Mailing Address	, МА т,мі)	1 1 1 1 1			7 7 1			
	39 OFFIC 40 Gty BATH	CE D	RIVE	<u> </u>		, , , , ,	4g) State	4h) Zip Code 0 4 5 3 0	
5. PROPERTY	5a) Map 19 – 5c) Physical Location 39 OFFIC	Block		28 - Sub-Lot		k any that apply:  No tax maps exis  Multiple parcels  Portion of parcel	number that best being sold. (See it 5d) Acreage:	erty—Enter the code describes the property instructions)	
6.TRANSFER TAX	6a) Purchase Pri	ce (If the	transfer is a gift, ente	∍r″0″)		6a \$		.,000	
	6b) Fair Market V if 6a) was of non		ter a value <b>only</b> if you te)	u entered "0" in 6	a) or	6b\$	,8	8000.00	
	6c) Exemption claim — ✓ Check the box if either grantor or grantee is claiming exemption from transfer tax and explain.  Transfer from husband to wife, pursuant to divorce								
-	7. DATE OF TRANSF <u>0 H</u> <u>15</u> , MONTH DAY	<u>20</u>	./8. EAR	Tree Growth, subdivision,	a Substantial partition or cl	financial penalty hange in use.	assified as Farmlan could be triggered CLASSIFIED	l by development,	
which suggest th	JMSTANCES—Were a lat the price paid was boox and explain:	there any either mo	special circumstances i ore or less than its fair n	n the transfer narket value?		A walver has be	Maine income fied as a Maine resi	dent he State Tax Assessor	
I1. OATH	Aware of penalt our knowledge an Grantee	ies as set d belief, it	forth by Title 36 §4641 is true, correct, and cor	nplete. Grantee(s) a	er or affirm the and Grantor(s) Grantor	at we have each e or their authorize	examined this retur ed agent(s) are requ	n and to the best of ulred to sign below:	
	Grantee		Date		Frantor	<del>y'</del>		Date VIIVIII	
12. PREPARER	Name of Preparer	Teeri				20	7-761-7277	Date	
- I HE SHER		615 R	linn Hill Roa	nd		ie italiani	**	ttlement.com	
	Mailing Address		en, Maine 043		E-Ma	il Address <u>Je</u>		- crement. COI	
			-,	<del>-</del>					

## **PROCESSED** ONLINE.

I

DLN: 1001840033757

## **MAINE REVENUE SERVICES**

Registry Sagadahoc

OO NOT	RE-PROCES		AL ESTATE T DECLAR		AX				07/27/201	
RE'	ΓTD	TITLE 3	36, M.R.S.A. SECT		4641N		Time	Recorded	11:55:00	<u>AM</u>
					101111	Tran	sfer Tax	Amount	\$734.80	
Sagadaho	c				ļ	D	ocumen	t Number	2018r-049	991
1. County								Book	2018	
BATH									4991	
2. Municipality	/Township						воок		ISTRY USE ONLY	
3. GRANTEE/ PURCHASER	CANDLAN 3a) Name (LAST)	D	BREEANNI (FIRST)	E DUGAY	_	(MI)		s) SSN or Feder		
	3c) Name (LAST)		(FIRST)			(MI)	30	l) SSN or Feder	al ID	
	77 RUSSEL	L STREET								
	3e) Mailing Address							3.67	04500	
	BATH 3f) City							ME 3g) State	04530 3h) Zip Cod	
4. GRANTOR/ SELLER	ST. PIERRE 4a) Name (LAST)		SARAH (FIRST)			B.	45	) SSN or Federa		
	4c) Name (LAST)  45 CRESCE	NT STREET	(FIRST)			(MI)	40	) SSN or Federa	al ID	
	4e) Mailing Address								<b>T</b>	
	BATH 4f) City							ME	04530	
5. PROPERTY					5b) Type o	of property	Enter the	4g) Sta code number		ode
	32 5a) Map	Block		Sub-Lot	Check any t		y:	<b>d.</b> (See instruct	ions)—» 201	L
	77 RUSSEL1 5c) Physical Location	L STREET		. ,	Multi	ple parce on of parc	els cel	0.00		
5. TRANSFER TA	X 6a) Purchase F	Price (If the trans	fer is a gift, enter "	'0")		6a	\$167,	000		.00
	6b) Fair Marke if 6a) was of ne		alue <b>only</b> if you e	entered "0" in 6a)	) or	6b				.00
	•		the box if either gra	antor or grantee is	s claiming ex		n from trai	nsfer tax and	explain.	
	-	_			_	·			·	
07 MONTH	NSFER (MM-DD-YYYY 25 2018 DAY YEAR	front a sub	NG TO BUYER—If the ostantial financial pe	property is classifi enalty could be trig	ied as Farml ggered by d	and, Ope evelopm	en Space, ent, subd	Free Growth, vision, partit	ion or change i	ter- n use. SIFIED
n the transfer wl	UMSTANCES—Were the policy of t	orice paid was eith	er more or less	10. INCOM		i	income ta	ot required to x because: as a Maine re	o withhold Mai	ne
		·				waiver h	nas been r ation for tl	eceived from	the State Tax A s less than \$50,0	
1. OATH	Aware of penaltic	es as set forth by I I belief, it is true, co	<b>Fitle 36</b> §4641-K, we orrect, and complete	hereby swear or a e. Grantee(s) and G	affirm that v Grantor(s) or	ve have o their aut	each exan thorized a	nined this ret gent(s) are re	urn and to the equired to sign	best of below:
		B. ST. PIERR	E Date <u>07/</u>	31/2018 Grant					LAND 07/3	1/2018
	Grantee		Date	31/2018 Grant					Date07/3	1/2018
2. PREPARER	Name of Preparer		SERVICES, LLC		Phone N	lumber_	(207) 77			
	Mailing Address .	119 MIDDLE S			_ E-Mail A	ddress _	lgrondin	@phenixtitle.	.com	
		PORTLAND, M	E 04101		_ Fax Nun	nber .				

**RETTD** 

DLN: 1001840033718

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

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

Re	gistry	Sagadaho	<u>c</u>
Date Rec	orded	07/27/201	8
Time Rec	orded	12:04:00	PM
Transfer Tax A	mount	\$844.80	
Document No	umber	2018r-049	995
	Book	2018	
	Page	4995	
BOOK/PAG	GE—REG	ISTRY USE ONLY	,
J			
(MI) 3b) \$\$i	N or Fede	ral ID	
E 3d) SSI	N or Feder		
(1111) 30/331	voi redei	aliD	
	ME	04530	
	3g) State	3h) Zip Cod	e
M (MI) 4b) SSN	N or Feder	al ID	·
G			
(MI) 4d) SSN	or Feder	al ID	
	ME	04520	
	4g) Sta	04530 4h) Zip C	ode
property—Enter the code e property being <b>sold</b> . (S at apply:			2
maps exist	1.0		
n of parcel	0.19 screage		
6a \$192,000			.00
			$\neg$

Sagadah	oc			Do	ocument Number 20	18r_04995
1. County						
BATH					Book <u>20</u>	
2. Municipality	y/Township		<del></del>		Page <u>49</u>	
3. GRANTEE/					BOOK/PAGE—REGISTRY	USE ONLY
PURCHASER	REID 3a) Name (LAST)	HOLLY		J (MI)	3b) SSN or Federal ID	
	BROWN 3c) Name (LAST)	JAMES (FIRST)		E (MI)	3d) SSN or Federal ID	
	52 OFFICE 3e) Mailing Address	DRIVE				
	BATH 3f) City				ME 3g) State	04530 3h) Zip Code
4. GRANTOR/ SELLER	LINGO 4a) Name (LAST)	STIRL (FIRST)		<b>M</b> (MI)	4b) SSN or Federal ID	SH) ZIP COUC
	LINGO 4c) Name (LAST)	PAULA (FIRST)		G (MI)	4d) SSN or Federal ID	
	88 OLIVER	STREET				
	4e) Mailing Address					
	BATH 4f) City				ME 4g) State	04530 4h) Zip Code
5. PROPERTY	19 5a) Map		describ Check at		kist	
	52-54 OFFIC	LE DRIVE		ortion of parce	1 0.17	
6. TRANSFER TA	AX 6a) Purchase	Price (If the transfer is a gift, enter "0")		6a	\$192,000	.00
		et Value (enter a value <b>only</b> if you ente	red "0" in 6a) or	6b	, , , , , , , , , , , , , , , , , , , ,	.00
	6c) Exemption	claim – Check the box if either granto	r or grantee is claimin	g exemption	from transfer tax and expl	ain.
07 MONTH	ANSFER (MM-DD-YYY) 27 2018 DAY YEAR	front a substantial financial penalty	y could be triggered b	y developme	ent, subdivision, partition o	or change in use.  CLASSIFIED
in the transfer v		here any special circumstances price paid was either more or less the box and explain:	_	ir Seller has o	suyer(s) not required to wit income tax because: qualified as a Maine reside as been received from the	nt
				Foreclosur		
11. OATH	Aware of penalti our knowledge and GranteeSTIRL 1	ies as set forth by Title 36 §4641-K, we her d belief, it is true, correct, and complete. Gra M. L. INGO 07/31/	antee(s) and Grantor(s	i) or their auth	horized agent(s) are require	ed to sign below:
		G I INGO 07/21/	1010 TA	MES E BR	POWNI	ote 07/31/2018 07/31/2018
12. PREPARER	Name of Preparer	JOHN T. VOORHEES, JR.	Glantol		(207) 729-1667	te <u>07/31/2018</u>
	Mailing Address	13 PLEASANT STREET			ewhite@midcoasttitle.com	
	maning Address	BRUNSWICK, ME 04011		Mumber		

# PROCESSED

DLN: 1001840033869

ONLINE.			MAINE REVENUE SERVICES				Registry	Sagadahoo	2
			REAL ESTATE TRANSFER TAX		Date Recorded		07/27/201	8	
DO NOT RE-PROCESS. <b>RETTD</b>			DECLARATION		Time Recorded		02:48:00 H	PM	
<u>KE</u>	ווט		TLE 36, M.R.S.A. SEC	TIONS §§4641-46	641N	Transf	er Tax Amount	\$858.00	
Sagadaho	oc						cument Number		14
1. County								2018	
BATH								5014	<u>.</u>
2. Municipality	/Township						Page BOOK/PAGE—REC		_
3. GRANTEE/ PURCHASER							DOONTAGE NEC	JISTRI OSE OIVET	
	BEAN 3a) Name (LAST)		JENNIFER			L	21/661	Lip	_
	Sa) Name (LAST)		(rins))			(MI)	3b) SSN or Fede	eral ID	_
	3c) Name (LAST)		(FIRST)			(MI)	3d) SSN or Fede	eral ID	<del> </del>
	PO BOX 942	2				7			
	3e) Mailing Address								
	BATH						ME	04530	
4. GRANTOR/	3f) City						3g) State	3h) Zip Code	
SELLER	HAYES 4a) Name (LAST)		DANNA (FIRST)			C	41.2501 5.1	LID	<u>-</u>
						(MI)	4b) SSN or Fede	ral ID	
	HAYES 4c) Name (LAST)		JOSEPH (FIRST)			P (MI)	4d) SSN or Fede	ral ID	
	1238 HIGH S	STREET					,		
	4e) Mailing Address					J 			
	BATH						ME	04530	
5 DDODEDTY	4f) City						4g) St		ode
5. PROPERTY	20		57		describe		Enter the code numbe being <b>sold.</b> (See instruc		
	5a) Map	Block	Lot	Sub-Lot	_	tax maps exis	st		
	1238 HIGH S	STREET				ultiple parcels rtion of parcel	0.00		
6. TRANSFER TA	5c) Physical Location			L		tion of parcer	5d) Acreage		<del>,</del>
O. INANSPER IA	6a) Purchase F	Price (If the	transfer is a gift, enter	"0")		6a \$	5195,000		.00
	6b) Fair Marke if 6a) was of no		ter a value <b>only</b> if you	entered "0" in 6a) o	or	6 h			00.
			•			6b			J .00
	oc) Exemption (	ciaim – 🔲	Check the box if either g	rantor or grantee is c	iaimin <u>c</u>	g exemption fr	om transfer tax and	d explain.	
	NSFER (MM-DD-YYYY		ARNING TO BUYER-if the						
07 MONTH	27 2018 DAY YEAR		a substantial financial p	enaity could be trigge	erea by	/ aevelopmen	t, subdivision, parti	ition or change in CLASS	
9. SPECIAL CIRC	UMSTANCES—Were th			10. INCOME	TAX W	<b>ITHHELD</b> Bu	yer(s) not required	<u> </u>	_
	hich suggest that the p ket value? If yes, check				_	_ inc	ome tax because: ualified as a Maine i		
	,, .				Ê		been received from		ssessor
						7	on for the property	is less than \$50,0	00
11. OATH	Aware of penaltic	es as set for	th <b>by Title 36</b> §4641-K, w	e hereby swear or aff	firm tha	Foreclosure at we have eac		turn and to the h	est of
	our knowledge and	belief, it is t	rue, correct, and complet	e. Grantee(s) and Gra	antor(s)	or their autho	orized agent(s) are i	required to sign b	elow:
	IOCEDII	C HAYE P HAYE	Date	(0.1./0.010		NNIFER L	BEAN	Date07/31.	
12. PREPARER	Name of Preparer		BROADWATER	/31/2018 Grantor		o Number (	207) 729-9740	Date07/31.	/2018
	Mailing Address .	P.O. BOX					ngel@broadwaterla	w.org	
		BRUNSW	ICK, ME 04011			lumber			

# PROCESSED ONLINE.

DLN: 1001840033677

## MAINE REVENUE SERVICES REAL ESTATE TRANSFER TAX DECLARATION

Registry Sagadahoc

DO NOT	<b>RE-PROCES</b>	חר	I LINANSPEN IA Ladation	<b>'^</b>	Da	te Recorded	07/31/20	18	
RETTD		) DEC.	<b>DECLARATION</b> TITLE 36, M.R.S.A. SECTIONS §§4641-4641N			Time Recorded 10:17:00 A			
		TITLE 30, W.R.S.A.	111EL 30, M.N.S.A. SECTIONS 334041-4041N			Transfer Tax Amount			
Sagadaho	oc				Docum	ent Number	2018r-05	085	
1. County						Book	2018		
BATH									
2. Municipality	y/Township				P.O.	Page OK/PAGE—REG	5085	· · · · · · · · · · · · · · · · · · ·	
3. GRANTEE/ PURCHASER					ьо	ON FAGE—REC	DISTRI USE ONL	_T	
· OKCIIIIOLK	BLALACK		NΑ						
	3a) Name (LAST)	(FIRST)		(1	AI)	3b) SSN or Fede	ral ID		
	3c) Name (LAST)	(FIRST)		<b>(</b> )	41)	2 1) 6611	- 1/5		
	4028 RILEY		-		11)	3d) SSN or Fede	rai ID		
	3e) Mailing Address	DRIVE							
	LONGMON	√T				СО	80503		
	3f) City					3g) State	3h) Zip Co		
4. GRANTOR/ SELLER	HARKINS	KARLA							
JEELEN	4a) Name (LAST)	(FIRST)		(1)	11)	4b) SSN or Fede	ral ID		
	4c) Name (LAST)	(FIRST)		(^	11)	4d) SSN or Feder	ral ID		
	27 PINE ST	REET							
	4e) Mailing Address			•					
	BATH					ME	04530		
5. PROPERTY	4f) City		1	51) T (		4g) St		Code	
J. PROPERTY	33	177-00	0	5b) Type of prope describes the prop	erty being	the code number sold. (See instruc	that best tions)—» 20	1	
	5a) Map	Block Lot	Sub-Lot	heck any that ap					
	27 PINE ST	REET		Multiple pa	rcels	2.04			
	5c) Physical Location			Portion of p	arcel	5d) Acreage			
6. TRANSFER TA	6a) Purchase	Price (If the transfer is a gift, e	nter "0")	6	\$12	4,000		.00	
	6b) Fair Marke	et Value (enter a value <b>only</b> if y	you entered "0" in 6a) o	or				=	
	if 6a) was of n	nominal value)		6k	·	•		00	
	6c) Exemption	claim – Check the box if eith	ner grantor or grantee is o	claiming exempt	ion from	transfer tax and	l explain.		
7. DATE OF TRA	ANSFER (MM-DD-YYY		If the property is classifie	ed as Farmland, C	pen Spac	e, Tree Growth	, or Working Wa	ater-	
07	27 2018	front a substantial financ	ial penalty could be trigg	gered by develor	ment, su	bdivision, parti			
MONTH 9 SPECIAL CIRC	DAY YEAR	there any special circumstances	10 INCOME	TAVMTUUELE	D	N 1 - 1 - 1 - 1		SSIFIED	
in the transfer w	vhich suggest that the	price paid was either more or less	io. income	TAX WITHHELD		s) not required t e tax because:	to withhold Ma	ine	
than its fair mar.	ket value? If yes, check	the box and explain:		—		ed as a Maine r			
						n received fron r the property i			
				Foreclo	sure Sale				
11. OATH	Aware of penalti	ies as set forth by Title 36 §4641- d belief, it is true, correct, and com	-K, we hereby swear or at	ffirm that we have	e each ex	ramined this re	turn and to the	best of	
	Grantee KARLA		07/31/2018 Granto				equired to sign  Date 07/3		
	Grantee		07/31/2018 Granto				Date 07/3	1/2018	
12. PREPARER	Name of Preparer			Phone Numbe	r(603)	427-9399			
	Mailing Address	676 POST ROAD #3		E-Mail Addres	varse	nault@reddoort	itle.com		
		WELLS, ME 04090		Fax Number	****	*******		W	

**RETTD** 

Sagadahoc 1. County **BATH** 

DLN: 1001840034115

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

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

		Registry	Saga	dahoc				
	Dat	e Recorded	07/31/2018					
	Tim	e Recorded	01:12:00 PM					
Trai	nsfer T	ax Amount	\$858.00					
D	ocume	ent Number	2018r-05098					
		Book	2018		_			
		Page	5098					
	вос	OK/PAGE—REG		E ONLY				
J								
(MI)	)	3b) SSN or Feder	al ID					
D (MI)		3d) SSN or Feder	al ID					
(,,,,,		30) 33N OF FEGE	al ID					
		7 [	<b>-</b> -					
		☐ ME		1530				
		3g) State	3h)	Zip Code				
B (MI)		4b) SSN or Feder	al ID					
F								
(MI) 4d) SSN or Federal ID								
		ME		1021				
		4g) Sta		FU∠ I lh) Zip Coc	de			
f property ne proper	y—Enter	the code number	that <b>best</b>	201				
nat appl k maps e	ly:							
ole parc	els	0.00						
n of par	cel	5d) Acreage						
6a	\$195	5,000			.00			
6b					.00			
'	n from t	ransfer tax and	evolain					
ici ipiio		ansier tax arra	capidiii.					
and, Ope	en Space	e, Tree Growth,	or Worki	ng Water	-			
		division, partit		iange in u	ıse.			
HELD-	Ruver(s)	not required to	o withho	CLASSIF				
	income	tax because:		ia manie				
eller has qualified as a Maine resident waiver has been received from the State Tax Assessor								
onsider	ation for	the property is						
oreclosu ve have		amined this ret	urn and	to the be	st of			
	thorized HELPS	l agent(s) are re						
	PHEL		_ Date _ _ Date _	07/31/2 07/31/2				

2. Municipality/Township 3. GRANTEE/ **PURCHASER** PHELPS LACEY 3a) Name (LAST) (FIRST) PHELPS **JEREMY** 3c) Name (LAST) (FIRST) 1 BLUFF ROAD Be) Mailing Address BATH 3f) City 4. GRANTOR/ **NICHOLS** JOHN **SELLER** 4a) Name (LAST) (FIRST) **NICHOLS** MARY JO 4c) Name (LAST) (FIRST) 54 FIELD ROAD 4e) Mailing Address **CUMBERLAND** 4f) City 5. PROPERTY 5b) Type of 29 21 describes ti Check any th 5a) Map Block Lot Sub-Lot No tax 1 BLUFF ROAD Multip Portio 5c) Physical Location 6. TRANSFER TAX 6a) Purchase Price (If the transfer is a gift, enter "0") 6b) Fair Market Value (enter a value only if you entered "0" in 6a) or if 6a) was of nominal value) 6c) Exemption claim – Check the box if either grantor or grantee is claiming ex 7. DATE OF TRANSFER (MM-DD-YYYY) 8. WARNING TO BUYER-If the property is classified as Farmla front a substantial financial penalty could be triggered by de 07 2018 MONTH 9. SPECIAL CIRCUMSTANCES—Were there any special circumstances 10. INCOME TAX WITH in the transfer which suggest that the price paid was either more or less than its fair market value? If yes, check the box and explain: 11. OATH Aware of penalties as set forth by Title 36 §4641-K, we hereby swear or affirm that w our knowledge and belief, it is true, correct, and complete. Grantee(s) and Grantor(s) or JOHN B NICHOLS Grantee 07/31/2018 LACI Grantor MARY JO F NICHOLS **JERE** Grantee Grantor 12. PREPARER LYNN BILODEAU Name of Preparer Phone Number (207) 874-0500 70 CENTER STREET Lynn@mclaughlintitle.com Mailing Address E-Mail Address PORTLAND, ME 04101 Fax Number http://www.maine.gov/revenue/propertytax/transfertax/transfertax.htm

Merits: 0011863764338 Trips: 7182400660077



## MAINE REVENUE SERVICES DEAL ESTATE TO ANGEED TAV

		REAL ESTA DEC TITLE 36, M.R.S.A PLEASE TYPE	VENUE SERVICES TE TRANSFER TA LARATION A. SECTIONS 4641-46 OR PRINT CLEAR USE RED INK!	X /	3/20/8 R- Transfer State of Maine SAGADAHOC CO 20[8— BOSK/BAGE_REGISTRY	Tax of OO Transfer Tax DUNTY-MAINE
3. GRANTEE/ PURCHASER	3a, Hame LAST, FIRST, MII OCERETKO, E 3ch Kame LAST, FIRST, MII 3ch Mailing Address 22 BIRCH PO 3ft City WEST BATH	PETER INT ROAD				1 Zip Code 04530
4. GRANTOR/ SELLER	4c hame (ASI, HRS', MI) 4c hame (ASI, HRS', MI) 4c Mailing Address 55 FRONT ST 4f) Gry BATH	and the state of the state of				ni Zip Code 0 4 5 3 0
5. PROPERTY  6. TRANSFER	ia, Map Elon 19 – ScrPinson PENNY RO		S.b-tox	Check any that appears to tax maps Multiple par Portion of pr	being sold. Gee instru  s exist  cels  Sd) Acreage	cribes the property
TAX	6a) Purchase Price (If the 6b) Fair Market Value (er if 6a) was of nominal val 6c) Exemption claim -  Deed from City of Ba	iter a value only if you ue) Check the box if either	entered "0" in 6a) or	6b S <u>.</u>	m transfer tax and explain.	
	MONTH DAY	.1.8. YEAR	Tree Growth, à Subs subdivision, partitio	tantial financial per in or change in use.	CLASSIFIED	development,
which suggest th	JMSTANCES—Were there any nat the price paid was either ri pox and explain:	ove of less than its fair m	arket value? 🛄	Seller has one of the consideration of the consider	HELD— Buyer(s) not requi Maine income tax qualified as a Maine residen as been received from the S tion for the property is less t	because: t tate Tax Assessor than \$50,000
11.OATH	Aware of panalties as se our knowledge and belief, Grantee WW W Grantee	t forth by Title 36 §4641- istine, correct, and con USCUSED Date Date	plete. Grantee(s) and Gra	ntor(s) or their aut		nd to the best of d to sign below: e 7/26/18 e 7/26/18
12. PREPARER	Mailing Address 839 1	W. Voorhees, Washington Str	Esq. eet	Phone Number E-Mail Address	207-443-1333 john@voorheesla	