

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2100	8/29/2019	Base: 65-0005		Affiliated:		Unified:						
Location ID		Sale Number		Useability & Code #		Parcel Number								
001316700		195		1		GeoCde	Twn	Rng	Sect	Qrt	Subdlv	Area	Blk	Parcel
Date of Sale Assessed Value						4135	4	9	36	1	00000	1	000	3565
Land		Improvements		Total		Date of Sale Property Classification Code								
310,395		9,570		319,965		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Irrigation Type:						A) 1	B) 05	C) 5	D) 3	E) 0	F) 9			
LCG		ACRES:		VALUE:		LCG		ACRES:		VALUE:				
IRRIGATED	1A1					GRASSLAND	1G1	4.070		5,555				
	1A						1G	4.810		6,565				
	2A1						2G1							
	2A						2G							
	3A1						3G1							
	3A						3G	0.430		585				
	4A1						4G1							
	4A						4G	42.270		57,700				
DRYLAND	1D1	9.380		21,900		Shelterbelt/Timber								
	1D	80.960		189,040		Accretion								
	2D1					Waste		5.600		1,010				
	2D					Other								
	3D1					AG LAND TOTAL		153.920		294,630				
	3D	2.540		4,980		Roads		3.980						
	4D1					Farm Sites		1.000		5,765				
	4D	3.860		7,295		Home Sites		1.000		10,000				
						Recreation								
	Dwellings			8,210		Other								
	Outbuildings			1,360		Non-AG TOTAL		5.980		15,765				

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value:
Assessor Comments and Reason for Adjustment:	
WD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

195

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number WEBSTER - 91		3 Date of Sale/Transfer Mo. <u>8</u> Day <u>21</u> Yr. <u>2019</u>		4 Date of Deed Mo. <u>8</u> Day <u>21</u> Yr. <u>2019</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Dennis Heil Street or Other Mailing Address 2050 N. Adams Cenral Road City Juniata State NE Zip Code 68955 Phone Number (402) 705-8360 Email Address NA				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Richard Heil Street or Other Mailing Address 2310 W. 6th Street City Hastings State NE Zip Code 68901 Phone Number (402) 463-9374 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address NA			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status <input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	(B) Property Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing <input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt	(C) <input type="checkbox"/> Mobile Home
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8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Corrective	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
<input type="checkbox"/> Other (Explain) _____				

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No _____

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No _____

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input checked="" type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$110,000

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)
 Yes No

18 Address of Property
Rural Webster County, Nebraska

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Richard Heil
2310 W. 6th Street
Hastings, NE 68901

18a No address assigned 18b Vacant land

20 Legal Description
Grantor's undivided 24.7619% interest in the NE 1/4 of Section 36, Township 4 North, Range 9 West of the 6th P.M., Webster County, Nebraska.

21 If agricultural, list total number of acres 160 +/-

22 Total purchase price, including any liabilities assumed	\$ 110,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	\$
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	\$ 110,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here **Richard Heil** (402) 463-9374
 Print or Type Name of Grantee or Authorized Representative Phone Number
Richard A Heil Grantee 9/28/19
 Signature of Grantee or Authorized Representative Title Date

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>3</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>247.50</u>	28 Recording Data <u>BK 2019, Pg 2100</u>

Grantee—Retain a copy of this document for your records.

BK2019, Pg 2100

State of Nebraska }
County of Webster } ss.
Entered on the
numerical index and filed for record in the
Clerk's office of said county this 3 day
of Sept A.D., 20 19, at 11:28
o'clock AM. Recorded in Book 2019
on Page 2100
Donise Peterson County Clerk
10.00 Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-3-19
\$ 247.50 By ab

Return recorded document to:
Brad Moncrief, L.L.C.
1239 N. Burlington Avenue, Suite 200
Hastings, NE 68901

WARRANTY DEED

DENNIS HEIL, a single person, in consideration of One and 00/100 (\$1.00)
DOLLAR and other valuable consideration received from GRANTEE, conveys to
GRANTEE, RICHARD HEIL, a single person, Grantor's undivided 24.7619% interest in
the following described real estate (as defined in Neb. Rev. Stat., § 76-201):

The Northeast Quarter (NE ¼) of Section 36, Township 4 North, Range 9
West of the 6th P.M., Webster County, Nebraska.

GRANTOR covenants (jointly and severally, if more than one) with GRANTEE
that GRANTOR:

- (1) is lawfully seized of such real estate and that it is free from encumbrances;
- (2) has legal power and lawful authority to convey the same;
- (3) warrants and will defend title to the real estate against the lawful claims of
all persons.

Executed 8-29-19, 2019.

Dennis Heil
DENNIS HEIL

STATE OF NEBRASKA)
)ss.
COUNTY OF ADAMS)

The foregoing instrument was acknowledged before me on
August 29, 2019, by Dennis Heil, a single person, Grantor.

Debra L. Weber
Notary Public

GENERAL NOTARY - State of Nebraska
DEBRA L. WEBER
My Comm. Exp. October 14, 2020

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2118	9/4/2019	Base: 91-0002	Affiliated:		Unified:					
Location ID	Sale Number	Useability & Code #		Parcel Number								
000141400	196	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4371			00	0	10025		008	0000
Land	Improvements	Total		Date of Sale Property Classification Code								
1,250	49,605	50,855		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 2			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements :	Multiple Improvements :
Construction Date:	Construction Date : 1884	Construction Date :
Floor:	Floor Sq. Ft. : 1,816	Floor Sq. Ft. :
Building Cost New:	Cost : 208,790	Cost :
Single Family Style: 104	Residential Condition: 30	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:
(101) <input type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class:
(102) <input type="checkbox"/> Two Story	(30) <input checked="" type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input checked="" type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality: 40	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input checked="" type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):

Assessor Comments and Reason for Adjustment:

WD

Comments from

Comments:

(Continue on back)

Real Estate Transfer Statement

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• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name	2 County Number FRANKLIN - 31	3 Date of Sale/Transfer Mo. <u>9</u> Day <u>4</u> Yr. <u>2019</u>	4 Date of Deed Mo. <u>9</u> Day <u>4</u> Yr. <u>2019</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Wendell J. Ord and Diana L. ord Street or Other Mailing Address 1938 Hwy 136 City Guide Rock State NE Zip Code 68942 Phone Number (402) 257-7003 Email Address n/a		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Kyle Prellwitz and Jessica Prellwitz Street or Other Mailing Address 437 W 7th Avenue City Red Cloud State NE Zip Code 68970 Phone Number 402-257-7129 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address n/a	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type		(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mobile Home
	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt	

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IFS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$50,000

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes **Southern Title, LLC** No

18 Address of Property
**437 W 7th Avenue
Red Cloud, NE 68970**

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Grantee

18a No address assigned 18b Vacant land

20 Legal Description
Lots Eleven (11) and Twelve (12), Block Eight (8), LeDuc's Addition to the City of Red Cloud, Webster County, Nebraska.

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$ 50,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$ 50,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Jessica Prellwitz
Print or Type Name of Grantee or Authorized Representative

Jessica Prellwitz
Signature of Grantee or Authorized Representative

Grantee
Title

402-257-7129
Phone Number

9/4/2019
Date

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>5</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>112.50</u>	28 Recording Data BK2019 Pg 2118

Grantee—Retain a copy of this document for your records.

BK 2019, Pg 2118

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 5 day of Sept A.D., 20 19, at 8:14 o'clock a.M. Recorded in Book 2019 on Page 2118
Louise Peterh County Clerk
10.00 Deputy
ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-5-19
\$ 112.50 By AB

Return to:
Southern Title, LLC
P O Box 221
Red Cloud, NE 68970

WARRANTY DEED

Wendell J. Ord and Diana L. Ord, husband and wife, Grantors, in consideration of ONE DOLLAR (\$1.00) and other valuable consideration received from Grantees, Kyle Prellwitz and Jessica Prellwitz, a married couple, convey to Grantees, as joint tenants and not as tenants in common, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

Lots Eleven (11) and Twelve (12), Block Eight (8), LeDuc's Addition to the City of Red Cloud, Webster County, Nebraska.

Grantors covenant, jointly and severally, if more than one, with Grantees that Grantors:

- (1) are lawfully seised of such real estate and that it is free from encumbrances;
- (2) have legal power and lawful authority to convey the same;
- (3) warrant and will defend title to the real estate against the lawful claims of all persons.

Executed September 4, 2019.

Wendell J. Ord
Wendell J. Ord

Diana L. Ord
Diana L. Ord

STATE OF NEBRASKA)
) ss.
COUNTY OF WEBSTER)

The foregoing instrument was acknowledged before me on September 4, 2019 by Wendell J. Ord and Diana L. Ord, husband and wife.

GENERAL NOTARY - State of Nebraska
TERESA L. THEOBALD
My Comm. Exp. August 27, 2021

Teresa L. Theobald
Notary Public

My commission expires: 8/27/2021

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2147	6/19/2019	Base: 01-0123		Affiliated:		Unified:						
Location ID		Sale Number		Useability & Code #		Parcel Number								
002100400		197		4 05		GeoCde	Twn	Rng	Sect	Qrt	Subdlv	Area	Blk	Parcel
Date of Sale Assessed Value						4131	4	11	3	0	00000	1	000	7004
Land		Improvements		Total		Date of Sale Property Classification Code								
328,245				328,245		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Irrigation Type:						A) 2	B) 05	C) 5	D) 3	E) 0	F) 9			
LCG		ACRES:		VALUE:		LCG		ACRES:		VALUE:				
IRRIGATED	1A1	7.000		31,115		GRASSLAND	1G1							
	1A	50.800		225,805			1G							
	2A1						2G1							
	2A						2G							
	3A1						3G1							
	3A						3G							
	4A1	9.400		40,140			4G1							
	4A						4G							
DRYLAND	1D1	0.500		1,170		Shelterbelt/Timber								
	1D	11.990		27,995		Accretion								
	2D1					Waste	0.710		130					
	2D					Other								
	3D1					AG LAND TOTAL	81.400		328,245					
	3D					Roads	3.000							
	4D1	1.000		1,890		Farm Sites								
	4D					Home Sites								
						Recreation								
	Dwellings					Other								
	Outbuildings					Non-AG TOTAL	3.000							

Assessor's Adjustment to Sale Price (+ or -):

Total Recapture Value:

Assessor Comments and Reason for Adjustment:

CORRECTIVE QCD; BETWEEN FAMILY

Comments from

Comments:

(Continue on back)

Real Estate Transfer Statement

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FORM 521

To be filed with the Register of Deeds. Read instructions on reverse side. If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91		2 County Number		3 Date of Sale/Transfer Mo. <u>06</u> Day <u>19</u> Yr. <u>2019</u>		4 Date of Deed Mo. <u>08</u> Day <u>30</u> Yr. <u>2019</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) DH & CB KARR FARM, LLC Street or Other Mailing Address 2309 PADRE ISLAND DRIVE City PUNTA GORDA State FL Zip Code 33950				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) DIANE HARVEY Street or Other Mailing Address 2309 PADRE ISLAND DRIVE City PUNTA GORDA State FL Zip Code 33950			
Phone Number (307) 640-3225		Phone Number (307) 640-3225		Is the grantee a 501(c)(3) organization? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		If Yes, is the grantee a 509(a) foundation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Email Address dianerickharvey@yahoo.com				Email Address dianerickharvey@yahoo.com			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status		(B) Property Type			(C)
<input type="checkbox"/> Improved	<input type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mineral Interests-Nonproducing	<input type="checkbox"/> State Assessed	<input type="checkbox"/> Mobile Home
<input checked="" type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input checked="" type="checkbox"/> Agricultural	<input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> Exempt	
<input type="checkbox"/> IOLL	<input type="checkbox"/> Commercial	<input type="checkbox"/> Recreational			

8 Type of Deed

<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Corrective	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input type="checkbox"/> Warranty		

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
Yes No

10 Type of Transfer

<input checked="" type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain)

11 Was ownership transferred in full? (If No, explain the division.)
Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input checked="" type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$382,600 (Based on 2019 assessed value for tax purposes)

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)
Yes No

18 Address of Property

19 Name and Address of Person to Whom the Tax Statement Should be Sent
DIANE HARVEY
2309 PADRE ISLAND DRIVE
PUNTA GORDA, FL 33950

18a No address assigned 18b Vacant land

20 Legal Description
The East Half of the Northeast Quarter (E1/2NE1/4) of Section Three (3), Township Four (4) North, Range Eleven (11) West of the 6th P.M., Webster County, Nebraska.

21 If agricultural, list total number of acres 84.4

22 Total purchase price, including any liabilities assumed	22	\$	000
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	000

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 4

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Diane Harvey Dan Wirbe 307-640-3225
Print or Type Name of Grantee or Authorized Representative Phone Number

Diane Harvey Dan Wirbe Escrow Agent
Signature of Grantee or Authorized Representative Title Date **9-1-19**

Register of Deed's Use Only

For Dept. Use Only

26 Date Deed Recorded Mo. <u>9</u> Day <u>6</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ Exempt #4	28 Recording Data BK 2019, Pg 2147
--	---	--

Grantee—Retain a copy of this document for your records.

State of Nebraska }
County of Webster } ss.

BK 2019, Pg 2147

Entered on the
numerical index and filed for record in the
Clerk's office of said county this 6 day
of Sept A.D., 2019, at 12:50
o'clock P.M. Recorded in Book 2019
on Page 2147-2148
Lorise Petach County Clerk
16.00 Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-6-19
\$Exempt #4 By AD

_____[Space Above This Line For Recording Data]_____

After recording return to:
Nicole Seckman Jilek
Abrahams Kaslow & Cassman LLP
8712 W. Dodge Road, Suite 300
Omaha, NE 68114

QUITCLAIM DEED
(Corrective Deed)

DH & CB KARR FARM, LLC, a Nebraska limited liability company, GRANTOR, in consideration of One Dollar (\$1.00) and other valuable consideration received from DIANE HARVEY, an individual, GRANTEE, quitclaims to GRANTEE the following described real estate (as defined in Neb. Rev. Stat. 76-201):

The East Half of the Northeast Quarter (E1/2NE1/4) of Section Three (3), Township Four (4) North, Range Eleven (11) West of the 6th P.M., Webster County, Nebraska.

This Deed has been executed and delivered to clarify the state of formation of Grantor under that certain Quitclaim Deed, dated June 19, 2019, and recorded on August 1, 2019, in the Books and Records of the Register of Deeds of Webster County, Nebraska, in Book 2019 on Page 1846-1848.

Executed this 30th day of August, 2019.

DH & CB KARR FARM, LLC,
a Nebraska limited liability company

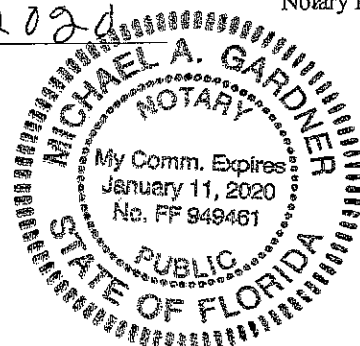
Diane Harvey
Diane Harvey, Member

STATE OF FLORIDA)
) ss.
COUNTY OF CHARLOTTE)

The foregoing instrument was acknowledged before me on AUG 30, 2019, by Diane Harvey, a member of DH & CB Karr Farm, LLC, a Nebraska limited liability company.

My Commission Expires:
01-11-2020

Michael A. Gardner
Notary Public



Cheryl Baxter
Cheryl Baxter, Member

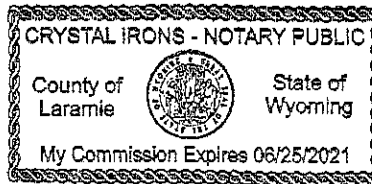
STATE OF Wyoming ss.
COUNTY OF Laramie

The foregoing instrument was acknowledged before me on August 29, 2019, by Cheryl Baxter, a member of DH & CB Karr Farm, LLC, a Nebraska limited liability company.

My Commission Expires:

10/25/21

Crystal Irons
Notary Public



Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2149	8/30/2019	Base: 01-0123	Affiliated:		Unified:					
Location ID	Sale Number	Useability & Code #		Parcel Number								
002100400	198	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4131	4	11	3	0	00000	1	000	7004
Land	Improvements	Total		Date of Sale Property Classification Code								
328,245		328,245		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Irrigation Type:				A) 2	B) 05	C) 5	D) 3	E) 0	F) 9			
LCG			ACRES:	VALUE:	LCG			ACRES:	VALUE:			
IRRIGATED	1A1	7.000	31,115	GRASSLAND	1G1							
	1A	50.800	225,805		1G							
	2A1				2G1							
	2A				2G							
	3A1				3G1							
	3A				3G							
	4A1	9.400	40,140		4G1							
	4A				4G							
DRYLAND	1D1	0.500	1,170	Shelterbelt/Timber								
	1D	11.990	27,995	Accretion								
	2D1			Waste		0.710				130		
	2D			Other								
	3D1			AG LAND TOTAL		81.400				328,245		
	3D			Roads		3.000						
	4D1	1.000	1,890	Farm Sites								
	4D			Home Sites								
				Recreation								
	Dwellings			Other								
	Outbuildings			Non-AG TOTAL		3.000						

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value:
Assessor Comments and Reason for Adjustment:	
WD	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

198

FORM
521

- To be filed with the Register of Deeds. • Read instructions on reverse side.
- If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name Adams	2 County Number 1	3 Date of Sale/Transfer Mo. 8 Day 30 Yr. 2019	4 Date of Deed Mo. 8 Day 19 Yr. 2019
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Diane Harvey and Frederick M. Harvey Street or Other Mailing Address 2309 Padre Island Dr. City State Zip Code Punta Gorda, FL. 33950 Phone Number n/a Email Address dwiebe@charter-title.net		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Paul D. Krueger, Trustee of the Paul D. Krueger Revocable Trust Street or Other Mailing Address 202 So. Hickory St. City State Zip Code Blue Hill, NE. 68930 Phone Number 402-834-3300 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address dwiebe@charter-title.net	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type			(C)
<input type="checkbox"/> Improved <input checked="" type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sherriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (IRC § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Trustee to Beneficiary
			<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract	<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$456,000.00

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes **Charter Title** No

18 Address of Property
, NE

19 Name and Address of Person to Whom Tax Statement Should be Sent
Paul D. Krueger, Trustee of the Paul D. Krueger Revocable Trust
Same as #6

18a No address assigned 18b Vacant Land

20 Legal Description
The East Half of the Northeast (E1/2NE1/4) of Section 3, Township 4 North, Range 11 West of the 6th P.M., Webster, County, Nebraska.

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed _____	22 \$ 456,000 00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23 \$ _____
24 Adjusted purchase price paid for real estate (line 22 minus line 23) _____	24 \$ 456,000 00
25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____	

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Paul D. Krueger, Trustee of the Paul D. Krueger Revocable Trust
Print or Type Name of Grantee or Authorized Representative

402 756 1660
Phone Number

sign here

Paul D. Krueger
Signature of Grantee or Authorized Representative

Grantee or Authorized Representative
Title

August 30, 2019
Date

Register of Deeds' Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. 9 Day 6 Yr. 19	27 Value of Stamp or Exempt Number \$ 1026.00	28 Recording Data BK 2019, Pg 2149

BK 2019, Pg 2149

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 6 day of Sept A.D., 2019, at 12:54 o'clock P.M. Recorded in Book 2019 on Page 2149-2150
Luise Retoch County Clerk
16.00 Deputy
Ind ___ Comp ___ Assessor ___ Carded ___

NEBRASKA DOCUMENTARY	
STAMP TAX	
Date	<u>9-6-19</u>
\$ <u>1026.00</u>	By <u>AD</u>

Upon Recording Return to:
Nicole Seckman Jilek
Abrahams Kaslow & Cassman LLP
8712 West Dodge Road Suite 300
Omaha, Nebraska 68114

WARRANTY DEED

DIANE HARVEY and FREDERICK M. HARVEY, wife and husband, GRANTORS, in consideration of One Dollar and other valuable consideration received from PAUL D. KRUEGER, Trustee of the Paul D. Krueger Revocable Trust, and BARBARA J. KRUEGER, Trustee of the Barbara J. Krueger Revocable Trust, GRANTEES, convey to GRANTEES the following described real estate (as defined in Neb. Rev. Stat. § 76-201):

The East Half of the Northeast Quarter (E1/2NE1/4) of Section Three (3), Township Four (4) North, Range Eleven (11) West of the 6th P.M., Webster County, Nebraska.

GRANTORS covenant with GRANTEES that GRANTORS:

- (1) are lawfully seised of such real estate and that such real estate is free from encumbrances except for real property taxes levied or assessed in the calendar year 2019, easements, encroachments, reservations, covenants, conditions, restrictions, rights-of-way, and other encumbrances of record, and applicable zoning ordinances and building codes;
- (2) have legal power and lawful authority to convey such real estate; and
- (3) warrant and will defend title to such real estate against the lawful claims of all persons.

Executed this 19 day of August, 2019.

Diane Harvey
Diane Harvey

STATE OF Florida)
) ss.
COUNTY OF Charlotte

The foregoing instrument was acknowledged before me on August 19, 2019, by Diane Harvey.



Kristi Ping
Notary Public

My commission expires 01-13-2023

Frederick M. Harvey
Frederick M. Harvey

STATE OF Florida)
) ss.
COUNTY OF Charlotte

The foregoing instrument was acknowledged before me on August 19, 2019, by Frederick M. Harvey.



Kristi Ping
Notary Public

My commission expires 01-13-2023

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code									
91	2019	2177	9/10/2019	Base: 91-0074		Affiliated:		Unified:					
Location ID	Sale Number	Useability & Code #		Parcel Number									
001703600	199	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4133	4	10	6	0	00000		000	6290	
Land	Improvements	Total		Date of Sale Property Classification Code									
18,435	23,150	41,585		Status	Property Type	Zoning	Location	City Size	Parcel Size				
Irrigation Type:				A) 1	B) 01	C) 5	D) 3	E) 0	F) 5				
LCG			ACRES:	VALUE:	LCG			ACRES:	VALUE:				
IRRIGATED	1A1				GRASSLAND	1G1							
	1A					1G							
	2A1					2G1							
	2A					2G							
	3A1					3G1							
	3A					3G							
	4A1					4G1							
	4A					4G							
DRYLAND	1D1					Shelterbelt/Timber							
	1D					Accretion							
	2D1					Waste							
	2D					Other							
	3D1				AG LAND TOTAL								
	3D				Roads			0.270					
	4D1				Farm Sites			1.000		5,765			
	4D				Home Sites			2.450		12,670			
					Recreation								
	Dwellings			23,150	Other								
	Outbuildings				Non-AG TOTAL				3.720		18,435		

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value:
Assessor Comments and Reason for Adjustment:	
JTWD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

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FORM
521

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer		4 Date of Deed	
WEBSTER - 91				Mo. 09 Day 10 Yr. 2019		Mo. 09 Day 10 Yr. 2019	
5 Grantor's Name, Address, and Telephone (Please Print)				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) Melba L. Dell				Grantee's Name (Buyer) Rosa Gomez and Abraham Gomez			
Street or Other Mailing Address PO Box 303				Street or Other Mailing Address 1718 W 8th St			
City Hildreth		State NE		City Hastings		State NE	
Zip Code 68947				Zip Code 68901			
Phone Number		Phone Number		Is the grantee a 501(c)(3) organization? if Yes, is the grantee a 509(a) foundation?		Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Email Address				Email Address			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type			(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed Conservator Distribution Land Contract/Memo Partition Sheriff Other _____
 Bill of Sale Corrective Easement Lease Personal Rep. Trust/Trustee
 Cemetery Death Certificate - Transfer on Death Executor Mineral Quit Claim Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer Distribution Foreclosure Irrevocable Trust Revocable Trust Transfer on Death
 Auction Easement Gift Life Estate Sale Trustee to Beneficiary
 Court Decree Exchange Grantor Trust Partition Satisfaction of Contract Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)
 Yes No Aunt or Uncle to Niece or Nephew Family Corp., Partnership, or LLC Self Other _____
 Brothers and Sisters Grandparents and Grandchild Spouse
 Ex-spouse Parents and Child Step-parent and Step-child

14 What is the current market value of the real property?

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes No

18 Address of Property
 1330 Rd Z
 Blue Hill, NE 68930
 18a No address assigned 18b Vacant land

19 Name and Address of Person to Whom the Tax Statement Should be Sent
 same as Grantee

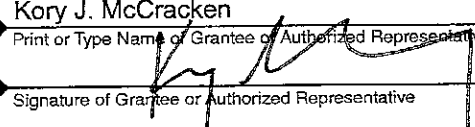
20 Legal Description
 see attached

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$ 16,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$ 0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$ 16,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here **Kory J. McCracken** (402) 746-3613
 Print or Type Name of Grantee or Authorized Representative Phone Number
 Attorney 09/10/19
 Signature of Grantee or Authorized Representative Title Date

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. 9 Day 10 Yr. 19	27 Value of Stamp or Exempt Number \$ 36.00	28 Recording Data BK2019 Pg 2177

A tract of land located in the Southwest Quarter (SW1/4) of Section 6, Township 4 North, Range 10 West of the 6th P.M., in Webster County Nebraska, described as follows: The South line of the said SW1/4 was assumed bearing N90°00'00"W and all bearings contained herein are relative thereto; commencing at the Southeast corner of said SW1/4, thence N90°00'00"W on the South line of said SW1/4, 733.22 feet to the true point of beginning; thence N00°17'32"E, 473.70 feet to the South line of the railroad ROW; thence S85°12'39"W, 352.30 feet on the South line of the railroad ROW; thence S00°39'51"E, 444.31 feet to the South line of the SW1/4; thence 90°00'00"E, 343.50 feet on the South line of the SW1/4 to the point of beginning, said tract contains 3.6598 acres more or less.

BK2019, Pg 2177

State of Nebraska } ss.
County of Webster }
Entered on the numerical index and filed for record in the Clerk's office of said county this 10 day of Sept A.D., 2019, at 1:48 o'clock P.M. Recorded in Book 2019 on Page 2177-2178
Rose Detach County Clerk
16.00 Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-18-19
\$ 36.00 By ds

JOINT TENANCY WARRANTY DEED

Melba L. Dell, a single person and surviving spouse of Hugh A. Dell, whose death certificate is attached hereto, GRANTOR, in consideration of ONE AND NO/100 DOLLARS (\$1.00) receipt of which is hereby acknowledged, conveys to Rosa Gomez, a single person and surviving spouse of Martin Gomez, and Abraham Gomez, a single person, as joint tenants, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

A tract of land located in the Southwest Quarter (SW1/4) of Section 6, Township 4 North, Range 10 West of the 6th P.M., in Webster County Nebraska, described as follows: The South line of the said SW1/4 was assumed bearing N90°00'00"W and all bearings contained herein are relative thereto; commencing at the Southeast corner of said SW1/4, thence N90°00'00"W on the South line of said SW1/4, 733.22 feet to the true point of beginning; thence N00°17'32"E, 473.70 feet to the South line of the railroad ROW; thence S85°12'39"W, 352.30 feet on the South line of the railroad ROW; thence S00°39'51"E, 444.31 feet to the South line of the SW1/4; thence 90°00'00"E, 343.50 feet on the South line of the SW1/4 to the point of beginning, said tract contains 3.6598 acres more or less.

GRANTOR covenants (jointly and severally, if more than one) with the GRANTEES that GRANTOR:

- (1) is lawfully seized of such real estate and that it is free from encumbrances, except roads and highways, easements and restrictions of record;
- (2) has legal power and lawful authority to convey the same;
- (3) warrants and will defend title to the real estate against the lawful claims of all persons.

Executed September 10, 2019.

Melba L. Dell
Melba L. Dell

STATE OF NEBRASKA, COUNTY OF WEBSTER) ss.

The foregoing instrument was acknowledged before me on September 10, 2019, by Melba L. Dell, a single person.

Comm. expires



[Signature]
Notary Public

BK 2016-12-15

WHEN THIS COPY CARRIES THE RAISED SEAL OF THE STATE OF NEBRASKA, IT CERTIFIES THE DOCUMENT BELOW TO BE A TRUE COPY OF THE ORIGINAL RECORD ON FILE WITH THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES, VITAL RECORDS OFFICE, WHICH IS THE LEGAL DEPOSITORY FOR VITAL RECORDS

Stanley S. Cooper

STANLEY S. COOPER
ASSISTANT STATE REGISTRAR
DEPARTMENT HEALTH AND HUMAN SERVICES



DATE OF ISSUANCE
04/07/2016
LINCOLN, NEBRASKA

STATE OF NEBRASKA - DEPARTMENT OF HEALTH AND HUMAN SERVICES
CERTIFICATE OF DEATH

16 21941

1. DECEDENT'S NAME (First, Middle, Last, Suffix) Hugh Arthur Dell		2. SEX Male	3. DATE OF DEATH (Mo., Day, Yr.) March 20, 2016
4. CITY AND STATE OR TERRITORY, OR FOREIGN COUNTRY OF BIRTH Niagara Falls, New York		5a. AGE-Last Birthday (Yrs.) 86	5b. UNDER 1 YEAR MOS. DAYS HOURS MINS.
7. SOCIAL SECURITY NUMBER		8. PLACE OF DEATH HOSPITAL: <input checked="" type="checkbox"/> Inpatient <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Hospice Facility OTHER: <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> Decedent's Home <input type="checkbox"/> DQA <input type="checkbox"/> Other(Specify)	
8b. FACILITY-NAME (If not institution, give street and number) VA Medical Center		6. DATE OF BIRTH (Mo., Day, Yr.) December 15, 1929	
9c. CITY OR TOWN OF DEATH (Include Zip Code) Omaha 68105		8d. COUNTY OF DEATH Douglas	
8a. RESIDENCE-STATE Nebraska	8b. COUNTY Franklin	8c. CITY OR TOWN Hildreth	
8d. STREET AND NUMBER 305 Block Ave		8e. APT. NO.	8f. ZIP CODE 68047
8g. INSIDE CITY LIMITS <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
10a. MARITAL STATUS AT TIME OF DEATH <input checked="" type="checkbox"/> Married <input type="checkbox"/> Never Married <input type="checkbox"/> Married, but separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Unknown		10b. NAME OF SPOUSE (First, Middle, Last, Suffix) If wife, give maiden name. Melba L Worrell	
11. FATHER'S NAME (First, Middle, Last, Suffix) James Dell		12. MOTHER'S NAME (First, Middle, Maiden Surname) Lilly McGregor	
13. EVER IN U.S. ARMED FORCES? Give dates of service if Yes. (Yes, No, or unk) Yes 04/09/1957-09/15/1961		14a. INFORMANT-NAME Melba L Dell	
14b. RELATIONSHIP TO DECEDENT Wife			
16. METHOD OF DISPOSITION <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Donation <input type="checkbox"/> Cremation <input type="checkbox"/> Interment <input type="checkbox"/> Other(Specify)		16a. EMBALMER-SIGNATURE Not Embalmed	
16b. CEMETERY, CREMATORY OR OTHER LOCATION Outler-O'Neill-Meyer-Woodring Crematory		16c. LICENSE NO.	
16d. CITY/TOWN Council Bluffs		16e. DATE (Mo., Day, Yr.) March 25, 2016	
16e. STATE Iowa			
17a. FUNERAL HOME NAME AND MAILING ADDRESS (Street, City or Town, State) Reafey-Reafey-Hoffmann-Dworak & Gueler, 7805 W. Center Rd., Omaha, Nebraska for All Faiths Funeral Chapel, 113 South Madison, Smith Center, Kansas		17b. Zip Code 68124 68967	
CAUSE OF DEATH (See instructions and examples)			
18. PART I. Enter the <u>immediate cause</u> - disease, injury, or complication that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.		APPROXIMATE INTERVAL onset to death	
IMMEDIATE CAUSE 1) Cerebral edema with basilar ganglia hemorrhage		1 day	
DUE TO, OR AS A CONSEQUENCE OF:			
2) cerebral metastases		1 month	
DUE TO, OR AS A CONSEQUENCE OF:			
3) Neuroendocrine carcinoma of the lung		10/2014	
DUE TO, OR AS A CONSEQUENCE OF:			
4)			
18. PART II. OTHER SIGNIFICANT CONDITIONS-Conditions contributing to the death but not resulting in the underlying cause given in PART I. gastric adenocarcinoma, iron deficiency anemia, malnutrition		19. WAS MEDICAL EXAMINER OR CORONER CONTACTED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
20. IF FEMALE: <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year		21a. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined	
21b. IF TRANSPORTATION INJURY: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)		21c. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
21d. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH? <input type="checkbox"/> YES <input type="checkbox"/> NO			
22a. DATE OF INJURY (Mo., Day, Yr.)	22b. TIME OF INJURY m	22c. PLACE OF INJURY-At home, farm, street, factory, office building, construction site, etc. (Specify)	
22d. INJURY AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO	22e. DESCRIBE HOW INJURY OCCURRED		
22f. LOCATION OF INJURY - STREET & NUMBER, APT. NO.		CITY/TOWN	STATE ZIP CODE
23a. DATE OF DEATH (Mo., Day, Yr.) 03/20/2016		24a. DATE SIGNED (Mo., Day, Yr.)	
23b. DATE SIGNED (Mo., Day, Yr.) 04/01/2016		24b. TIME OF DEATH m	
23c. TIME OF DEATH 0750 pm		24c. TIME PRONOUNCED DEAD m	
23d. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) <i>Valerie Prescher Buman, MD</i>		24d. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title)	
25. DID TOBACCO USE CONTRIBUTE TO THE DEATH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> PROBABLY <input type="checkbox"/> UNKNOWN		26a. HAS ORGAN OR TISSUE DONATION BEEN CONSIDERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
26b. WAS CONSENT GRANTED? Not Applicable if 26a is NO <input type="checkbox"/> YES <input type="checkbox"/> NO			
27. NAME, TITLE AND ADDRESS OF CERTIFIER (Type or Print) Valerie Prescher Buman, MD VA Hospital 4101 Woolworth Ave, Omaha, NE, 68105			
28a. REGISTRAR'S SIGNATURE <i>Kid + our</i>		28b. DATE FILED BY REGISTRAR (Mo., Day, Yr.) APR 04 2016	

To be completed/verified by: FUNERAL DIRECTOR

To be completed by: VITALIST

To be completed by: MEDICAL CERTIFIER ONLY

To be completed by: CORONER'S PHYSICIAN or COUNTY ATTORNEY ONLY

0009976

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2179	9/10/2019	Base: 91-0074		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
001703600	200	4	05	GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4133	4	10	6	0	00000	000	6290	
Land	Improvements	Total		Date of Sale Property Classification Code								
18,435	23,150	41,585		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Irrigation Type:				A) 1	B) 01	C) 5	D) 3	E) 0	F) 5			
LCG	ACRES:	VALUE:		LCG	ACRES:	VALUE:						
IRRIGATED 1A1				GRASSLAND 1G1								
1A				1G								
2A1				2G1								
2A				2G								
3A1				3G1								
3A				3G								
4A1				4G1								
4A				4G								
DRYLAND 1D1				Shelterbelt/Timber								
1D				Accretion								
2D1				Waste								
2D				Other								
3D1				AG LAND TOTAL								
3D				Roads		0.270						
4D1				Farm Sites		1.000		5,765				
4D				Home Sites		2.450		12,670				
				Recreation								
Dwellings		23,150		Other								
Outbuildings				Non-AG TOTAL		3.720		18,435				

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value:
Assessor Comments and Reason for Adjustment:	
JTWD - BETWEEN GRANDPARENTS & GRANDCHILD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

200

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer		4 Date of Deed	
WEBSTER - 91				Mo. 09 Day 10 Yr. 2019		Mo. 09 Day 10 Yr. 2019	
5 Grantor's Name, Address, and Telephone (Please Print)				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) Rosa Gomez and Abraham Gomez				Grantee's Name (Buyer) Rosa Gomez, Abraham Gomez and Candaladio G. Gomez			
Street or Other Mailing Address 1718 W 8th St				Street or Other Mailing Address 1718 W 8th St			
City		State		City		State	
Hastings		NE		Hastings		NE	
Zip Code		68901		Zip Code		68901	
Phone Number				Is the grantee a 501(c)(3) organization?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
				If Yes, is the grantee a 509(a) foundation?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Email Address				Email Address			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type		(C)
<input checked="" type="checkbox"/> Improved	<input checked="" type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mobile Home
<input type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Agricultural	<input type="checkbox"/> State Assessed
<input type="checkbox"/> IOLL	<input type="checkbox"/> Commercial	<input type="checkbox"/> Recreational	<input type="checkbox"/> Exempt

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)

Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input checked="" type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
<input type="checkbox"/> Other (Explain)				

11 Was ownership transferred in full? (If No, explain the division.)

Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)

Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other
		<input type="checkbox"/> Brothers and Sisters	<input checked="" type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)

Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?

Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)

Yes No

18 Address of Property

1330 Rd Z
Blue Hill, NE 68930

18a No address assigned 18b Vacant land

19 Name and Address of Person to Whom the Tax Statement Should be Sent

same as Grantee

20 Legal Description

see attached

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$	0.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 5a

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Abraham Gomez Sr.
Print or Type Name of Grantee or Authorized Representative

Abraham Gomez Sr.
Signature of Grantee or Authorized Representative

Phone Number _____

Title _____

Date _____

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Data
Mo. 9 Day 10 Yr. 19	\$ Exempt # 5a	BK 2019, Pg 2179

A tract of land located in the Southwest Quarter (SW1/4) of Section 6, Township 4 North, Range 10 West of the 6th P.M., in Webster County Nebraska, described as follows: The South line of the said SW1/4 was assumed bearing N90°00'00"W and all bearings contained herein are relative thereto; commencing at the Southeast corner of said SW1/4, thence N90°00'00"W on the South line of said SW1/4, 733.22 feet to the true point of beginning; thence N00°17'32"E, 473.70 feet to the South line of the railroad ROW; thence S85°12'39"W, 352.30 feet on the South line of the railroad ROW; thence S00°39'51"E, 444.31 feet to the South line of the SW1/4; thence 90°00'00"E, 343.50 feet on the South line of the SW1/4 to the point of beginning, said tract contains 3.6598 acres more or less.

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 10 day of Sept A.D., 2019, at 2:48 o'clock P.M. Recorded in Book 2019 on Page 2179
Devise Petach County Clerk
10.00 Deputy
Ind. Comp. Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-10-19
\$ Exempt # By as

JOINT TENANCY WARRANTY DEED

Rosa Gomez, a single person, and Abraham Gomez, a single person, GRANTOR, in consideration of ONE AND NO/100 DOLLARS (\$1.00) receipt of which is hereby acknowledged, conveys to Rosa Gomez, a single person, Abraham Gomez, a single person, and Candaladio G. Gomez, a single person, as joint tenants, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

A tract of land located in the Southwest Quarter (SW1/4) of Section 6, Township 4 North, Range 10 West of the 6th P.M., in Webster County Nebraska, described as follows: The South line of the said SW1/4 was assumed bearing N90°00'00"W and all bearings contained herein are relative thereto; commencing at the Southeast corner of said SW1/4, thence N90°00'00"W on the South line of said SW1/4, 733.22 feet to the true point of beginning; thence N00°17'32"E, 473.70 feet to the South line of the railroad ROW; thence S85°12'39"W, 352.30 feet on the South line of the railroad ROW; thence S00°39'51"E, 444.31 feet to the South line of the SW1/4; thence 90°00'00"E, 343.50 feet on the South line of the SW1/4 to the point of beginning, said tract contains 3.6598 acres more or less.

GRANTOR covenants (jointly and severally, if more than one) with the GRANTEES that GRANTOR:

- (1) is lawfully seized of such real estate and that it is free from encumbrances, except roads and highways, easements and restrictions of record;
- (2) has legal power and lawful authority to convey the same;
- (3) warrants and will defend title to the real estate against the lawful claims of all persons.

Executed September 10, 2019.

Rosa Gomez
Rosa Gomez

Abraham Gomez
Abraham Gomez

STATE OF NEBRASKA, COUNTY OF WEBSTER) ss.

The foregoing instrument was acknowledged before me on September 10, 2019, by Rosa Gomez, a single person, and Abraham Gomez, a single person.



Comm. expires _____

Kory McCracken
Notary Public

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2209	8/30/2019	Base: 91-0002		Affiliated:		Unified:						
Location ID		Sale Number		Useability & Code #		Parcel Number								
000161100		201		1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value						4371			00	0	10090		000	0000
Land		Improvements		Total		Date of Sale Property Classification Code								
6,990		1,095		8,085		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)						A) 1	B) 03	C) 3	D) 1	E) 6	F) 4			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements. :	Multiple Improvements. : 2
Construction Date:	Construction Date :	Construction Date : 1960
Floor:	Floor Sq. Ft. :	Floor Sq. Ft. : 80
Building Cost New:	Cost :	Cost : 4,030
Single Family Style:	Residential Condition:	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: 471 Other1: Other2:
(101) <input type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class: 5
(102) <input type="checkbox"/> Two Story	(30) <input type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input checked="" type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality:	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: 25 Condition: 30
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input checked="" type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input checked="" type="checkbox"/> Above Average (30) <input checked="" type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
SPECIAL WD	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

201

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer		4 Date of Deed	
FRANKLIN - 31				Mo. 8 Day 30 Yr. 2019		Mo. 8 Day 30 Yr. 2019	
5 Grantor's Name, Address, and Telephone (Please Print)				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) Eagle Communications, Inc.				Grantee's Name (Buyer) Eagle Broadband Investments, LLC			
Street or Other Mailing Address 2703 Hall Street, Suite 15				Street or Other Mailing Address c/o Northland Cable, 101 Stewart Street, Suite 700			
City Hays		State KS	Zip Code 67601	City Seattle		State WA	Zip Code 98101
Phone Number (785) 625-4000		Email Address kdauid@goeaglecom.net		Phone Number (206) 621-1351		Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation?	
						Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Email Address kdauid@goeaglecom.net				Email Address rod@northlandco.com			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing <input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)

Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain)

11 Was ownership transferred in full? (If No, explain the division.)

Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)

Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?

\$8,085

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)

Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?

Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)

Yes Justin Hardacre No

18 Address of Property

West 11th and Chestnut Avenue, Red Cloud, NE

19 Name and Address of Person to Whom the Tax Statement Should be Sent

Eagle Broadband Investments, LLC, c/o Northland Cable, 101 Stewart St., Suite 700, Seattle, WA 98101

18a No address assigned 18b Vacant land

20 Legal Description

THE NORTH 200 FEET OF ANNEX LOT 3, IN THE CITY OF RED CLOUD, WEBSTER COUNTY, NEBRASKA, EXCEPT THE EAST 40 FEET OF THE NORTH 200 FEET OF SAID LOT, AS SHOWN IN THE DEDICATION RECORDED SEPTEMBER 16, 2004 IN BOOK 04, PAGE 1851, ACCORDING TO THE RECORDED PLAT THEREOF.

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	\$ 8,085.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	\$
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	\$ 8,085.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Print or Type Name of Grantee or Authorized Representative _____ (206) 621-1351 Phone Number

Signature of Grantee or Authorized Representative _____ See attached signature page.

Title _____ Date _____

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Data	
Mo. 9 Day 12 Yr. 19	\$ 20.25	BK 2019, Pg 2209	

BK 2019, Pg 2209

State of Nebraska } ss.
County of Webster }
Entered on the
numerical index and filed for record in the
Clerk's office of said county this 12 day
of Sept A.D., 2019, at 10:05
o'clock AM. Recorded in Book 2019
on Page 2209-2210
Rouse Detach County Clerk
16.00 Deputy
Ind. Comp. Assessor Carded

Return to:
Kirkland & Ellis LLP
300 North LaSalle
Chicago, IL 60654

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-12-19
\$ 20.25 By AD

SPECIAL WARRANTY DEED

On this day, the 30th day of August, 2019, for good and valuable consideration,

Eagle Communications, Inc., a Kansas corporation, (hereinafter "Grantor"), whose address is 2703 Hall Street, Suite 145, Hays, Kansas 67601,

grants, bargains, sells, conveys, and warrants to

Eagle Broadband Investments, LLC, a Delaware limited liability company, (hereinafter "Grantee"), whose address is 101 Stewart Street, #700, Seattle, Washington 98101, in fee simple with covenants, all of the following described real estate (the "Property"), situated in the City of Red Cloud, Webster County, Nebraska, to-wit:

The North 200 feet of Annex Lot 3, in the City of Red Cloud, Webster County, Nebraska, except the East 40 of the North 200 feet of said lot as show in the Dedication Deed recorded September 16, 2004 in Book 04, Page 1851, according to the recorded plat thereof.

The Grantor covenants with Grantee that Grantor:

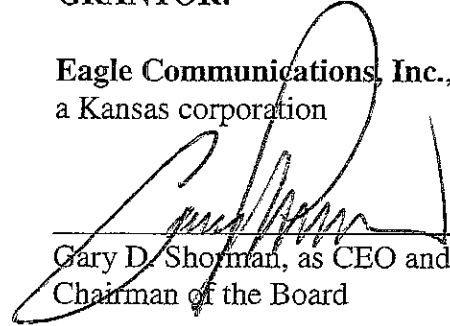
1. is lawfully seized of the Property and has full right, power, and authority to convey the Property.
2. warrants and represents that the Property is free and clear of all taxes, liens, and encumbrances, except, (i) ad valorem taxes due and payable in 2019 and thereafter, which Grantee assumes and agrees to pay; and (ii) all restrictions, easements, and stipulations of record and other governmental laws, rules and regulations affecting the Property; and
3. hereby warrant and agrees to forever defend the title to the Property unto the said Grantee against the claims of all persons claiming, through, or under the Grantor, but not otherwise.

[Signature page follows.]

IN WITNESS WHEREOF, the Grantor has caused this Special Warranty deed to be duly executed and delivered to the Grantee effective as of the day and year first written above.

GRANTOR:

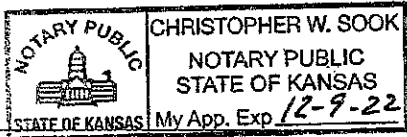
Eagle Communications, Inc.,
a Kansas corporation



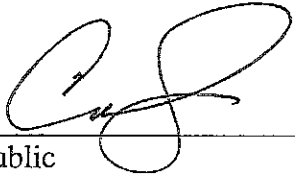
Gary D. Shorman, as CEO and
Chairman of the Board

STATE OF KANSAS, COUNTY OF ELLIS, ss:

ACKNOWLEDGED AND SUBSCRIBED AND SWORN to before me this 30th day
of August 2019, by **Gary D. Shorman, CEO and Chairman of the Board of Eagle
Communications, Inc.**



Appointment Expires



Notary Public

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2211	9/12/2019	Base: 91-0002		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000150800	202	4	05	GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4371			00	0	10045		004	0000
Land	Improvements	Total		Date of Sale Property Classification Code								
1,000	25,390	26,390		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 2			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements. :	Multiple Improvements. :
Construction Date:	Construction Date : 1900	Construction Date :
Floor:	Floor Sq. Ft. : 988	Floor Sq. Ft. :
Building Cost New:	Cost : 112,540	Cost :
Single Family Style: 101	Residential Condition: 20	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:
(101) <input checked="" type="checkbox"/> One Story	(20) <input checked="" type="checkbox"/> Badly Worn	Commercial Construction Class:
(102) <input type="checkbox"/> Two Story	(30) <input type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality: 30	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input checked="" type="checkbox"/> Average	(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
QCD; BETWEEN PARENT & CHILD	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

202

FORM
521

- To be filed with the Register of Deeds. • Read instructions on reverse side.
- If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer		4 Date of Deed	
		WEBSTER - 91		Mo. 9 Day 12 Yr. 2019		Mo. 8 Day 28 Yr. 2019	
5 Grantor's Name, Address, and Telephone (Please Print)				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) See attached				Grantee's Name (Buyer) Ruby M. Graham			
Street or Other Mailing Address				Street or Other Mailing Address 641 W 4th Avenue 104 Park View Circle			
City		State		City		State	
				Red Cloud		NE	
Phone Number		Zip Code		Phone Number		Zip Code	
				605-999-3255		68970	
Email Address				Is the grantee a 501(c)(3) organization?			
n/a				If Yes, is the grantee a 509(a) foundation?			
				Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
				Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type				(C)
<input checked="" type="checkbox"/> Improved	<input checked="" type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mineral Interests-Nonproducing	<input type="checkbox"/> State Assessed	<input type="checkbox"/> Mobile Home
<input type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> Exempt	
<input type="checkbox"/> IOLL	<input type="checkbox"/> Commercial	<input type="checkbox"/> Recreational			

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input checked="" type="checkbox"/> Quit Claim	<input type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)

Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input checked="" type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain)

11 Was ownership transferred in full? (If No, explain the division.)

Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)

Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustee and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input checked="" type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?

\$15,390

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)

Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?

Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)

Yes No

18 Address of Property

641 W 4th Avenue
Red Cloud, NE 68970

18a No address assigned 18b Vacant land

19 Name and Address of Person to Whom the Tax Statement Should be Sent

Grantee

20 Legal Description

The South Five feet (S 5') of Lot Twenty-one (21) and all of Lots Twenty-two (22), Twenty-three (23) and Twenty-four (24), Block Four (4), Radcliff's Addition to Red Cloud, Webster County, Nebraska

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	22	\$	0.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 5a

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Ruby M. Graham
Print or Type Name of Grantee or Authorized Representative

Ruby M. Graham
Signature of Grantee or Authorized Representative

605-999-3255
Phone Number

Grantee

9/12/2019
Date

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Data	
Mo. 9 Day 12 Yr. 19	\$ Exempt # 5a	BK 2019, Pg 2211	

Russell Graham
3839 Quail Hollow Ct
Springfield, OH 45502
605-999-3255

Sondra Peck
Box 222
Bonesteel, SD 57317
605-999-3255

Brinda Simons
27729 310th Ave
Winner, SD 57580
605-999-3255

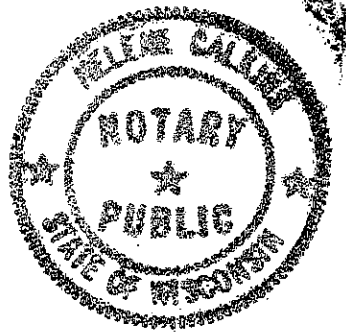
Barry Graham
834 18th St
Chetek, WI 54728
605-999-3255

Barry D. Graham

Barry D. Graham

STATE OF WISCONSIN)
) ss.
COUNTY OF Barron)

The foregoing instrument was acknowledged before me on 9-5-19,
2019 by Barry D. Graham, a single person.



Helene Calhoun
Notary Public Helene Calhoun
Barron Cty WI
Commission expires: 8-10-21

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2215	9/12/2019	Base: 91-0002		Affiliated:		Unified:						
Location ID		Sale Number		Useability & Code #		Parcel Number								
000150800		203		1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value						4371			00	0	10045		004	0000
Land		Improvements		Total		Date of Sale Property Classification Code								
1,000		25,390		26,390		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)						A) 1	B) 01	C) 1	D) 1	E) 6	F) 2			

		Residential	Commercial
Multiple Improvements:		Multiple Improvements. :	
Construction Date:		Construction Date : 1900	
Floor:		Floor Sq. Ft. : 988	
Building Cost New:		Cost : 112,540	
Single Family Style: 101		Residential Condition: 20	
(100) <input type="checkbox"/> Mobile Home		(10) <input type="checkbox"/> Worn Out	
(101) <input checked="" type="checkbox"/> One Story		(20) <input checked="" type="checkbox"/> Badly Worn	
(102) <input type="checkbox"/> Two Story		(30) <input type="checkbox"/> Average	
(103) <input type="checkbox"/> Split Level		(40) <input type="checkbox"/> Good	
(104) <input type="checkbox"/> 1 1/2 Story		(50) <input type="checkbox"/> Very Good	
(111) <input type="checkbox"/> Bi-Level		(60) <input type="checkbox"/> Excellent	
(106) <input type="checkbox"/> Other			
Townhouse or Duplex Style:		Residential Quality: 30	
(301) <input type="checkbox"/> One Story		(10) <input type="checkbox"/> Low	
(302) <input type="checkbox"/> Two Story		(20) <input type="checkbox"/> Fair	
(307) <input type="checkbox"/> 1 1/2 Story		(30) <input checked="" type="checkbox"/> Average	
(308) <input type="checkbox"/> Split Level		(40) <input type="checkbox"/> Good	
(309) <input type="checkbox"/> 2 1/2 Story		(50) <input type="checkbox"/> Very Good	
(304) <input type="checkbox"/> One Story Duplex		(60) <input type="checkbox"/> Excellent	
(305) <input type="checkbox"/> Two Story Duplex			
		Commercial Occupancy Code:	
		Primary: Other1: Other2:	
		Commercial Construction Class:	
		(1) <input type="checkbox"/> Fireproof Structural Steel Frame	
		(2) <input type="checkbox"/> Reinforced Concrete Frame	
		(3) <input type="checkbox"/> Masonry Bearing Walls	
		(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls	
		(5) <input type="checkbox"/> Metal Frame and Walls	
		(6) <input type="checkbox"/> Pole Frame	
		Cost Rank: Condition:	
		(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out	
		(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn	
		(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average	
		(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good	
		(50) <input type="checkbox"/> Very Good	
		(60) <input type="checkbox"/> Excellent	

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
JTWD	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

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FORM 521

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91 2 County Number WEBSTER - 91

3 Date of Sale/Transfer Mo. 9 Day 12 Yr. 2019 4 Date of Deed Mo. 9 Day 9 Yr. 2019

5 Grantor's Name, Address, and Telephone (Please Print) Ruby M. Graham

6 Grantee's Name, Address, and Telephone (Please Print) Keonon Paul Wynn and Diana Cagle Wynn

City Red Cloud NE State NE Zip Code 68970

City Locrest State GA Zip Code 30248

Street or Other Mailing Address 104 Park View Circle

Street or Other Mailing Address 1095 Frog Road

Phone Number 605-999-3255

Phone Number 605-999-3255

Is the grantee a 501(c)(3) organization? Yes No

If Yes, is the grantee a 509(a) foundation? Yes No

Email Address N/A

Email Address N/A

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status Improved Single Family Industrial Mineral Interests-Nonproducing State Assessed Exempt Mobile Home

(B) Property Type Improved Single Family Industrial Mineral Interests-Nonproducing State Assessed Exempt Mobile Home

(C)

8 Type of Deed Conservator Distribution Land Contract/Memo Partition Sheriff Other

Bill of Sale Corrective Death Certificate - Transfer on Death Executor Mineral Quit Claim Warranty

9 Was the property purchased as part of an IRS like-kind exchange? No Yes

10 Type of Transfer Auction Easement Gift Life Estate Sale Transfer on Death Irrevocable Trust Revocable Trust

11 Was ownership transferred in full? (If No, explain the division.) Yes No

12 Was real estate purchased for same use? (If No, state the intended use.) Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustee and beneficiary relatives? (If Yes, check the appropriate box.) Yes No

Aunts or Uncles or Nieces or Nephews Family Corp., Partnership, or LLC Self Other

Brothers and Sisters Grandparents and Grandchild Spouse Step-parent and Step-child

Ex-spouse Parents and Child

14 What is the current market value of the real property? \$15,000

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.) Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land? Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact) Yes Southern Title, LLC No

18 Address of Property 641 W 4th Avenue
Red Cloud, NE 68970

18a No address assigned 18b Vacant land

19 Name and Address of Person to Whom the Tax Statement Should be Sent

20 Legal Description The South Five feet (S 5') of Lot Twenty-one (21), and all of Lots Twenty-two (22), Twenty-three (23) and Twenty-four (24), Block Four (4), Radcliff's Addition Red Cloud, Webster County, Nebraska

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed. 15,000.00

23 Was non-real property included in the purchase? Yes No (If Yes, enter dollar amount and attach itemized list.)

24 Adjusted purchase price paid for real estate (line 22 minus line 23) 15,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Print or Type Name of Grantee or Authorized Representative Teresa Theobald

Signature of Grantee or Authorized Representative [Signature]

Closing Agent _____

Date _____

Phone Number (402) 746-2246

26 Date Deed Recorded Mo. 9 Day 12 Yr. 19

27 Value of Stamp or Exempt Number \$ 33.75

28 Recording Date BK2019, 12/12/19

For Dept. Use Only _____

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2253	9/16/2019	Base: 91-0074			Affiliated:		Unified:			
Location ID	Sale Number	Useability & Code #		Parcel Number								
000307600	204	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4133			00	0	20005		016	6630
Land	Improvements	Total		Date of Sale Property Classification Code								
1,850	110,260	112,110		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: BLUE HILL (BH)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 2			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements. :	Multiple Improvements. :
Construction Date:	Construction Date : 1900	Construction Date :
Floor:	Floor Sq. Ft. : 1,652	Floor Sq. Ft. :
Building Cost New:	Cost : 191,165	Cost :
Single Family Style: 101	Residential Condition: 35	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:
(101) <input checked="" type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class:
(102) <input type="checkbox"/> Two Story	(30) <input checked="" type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input checked="" type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality: 30	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input checked="" type="checkbox"/> Average	(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
WD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

204

To be filed with the Register of Deeds. Read instructions on reverse side. If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name	2 County Number WEBSTER - 91	3 Date of Sale/Transfer Mo. <u>09</u> Day <u>16</u> Yr. <u>19</u>	4 Date of Deed Mo. <u>09</u> Day <u>03</u> Yr. <u>19</u>
---------------	--	--	---

5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Travis G. Haden and Lindsey N. Haden	6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) George M. Reitz and Jenny L. Reitz
---	--

Street or Other Mailing Address 10550 S. Crystal Lake Ave.	Street or Other Mailing Address 605 W. Saline Street
--	--

City Ayr	State NE	Zip Code 68925	City Blue Hill	State NE	Zip Code 68930
--------------------	--------------------	--------------------------	--------------------------	--------------------	--------------------------

Phone Number (402) 984-3725	Phone Number (402) 984-3725 (402) 830-3501	Is the grantee a 501(c)(3) organization? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Is the grantee a 509(a) foundation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Email Address N.A.	Email Address N.A.		

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type		(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mobile Home
	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt	

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustee and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$135,000

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes **Adams Land Title Co** No

18 Address of Property
**605 W. Saline Street
Blue Hill, NE 68930**

19 Name and Address of Person to Whom the Tax Statement Should be Sent
See Grantee

18a No address assigned 18b Vacant land

20 Legal Description
The North Half (N1/2) of Lots One (1), Two (2), Three (3), Four (4) and Five (5), Block Sixteen (16), Original Town of Blue Hill, Webster County, Nebraska, according to the recorded plat thereof.

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	22	\$	135,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	135,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Danielle L. Kelley (402) 463-4198
 Part or Type Name of Grantee or Authorized Representative Phone Number
Danielle L. Kelley Escrow Closing Agent Signature of Grantee or Authorized Representative Title Date
 09-16-19

sign here

Register of Deed's Use Only

26 Date Deed Recorded Mo. <u>9</u> Day <u>19</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>303.75</u>	28 Recording Data BK 2019, Pg 2253	For Dept. Use Only
---	--	--	--------------------

Grantee—Retain a copy of this document for your records.

Index _____
Computer _____
Assessor _____
Carded _____

NEBRASKA DOCUMENTARY
STAMP TAX
Date: 09/19/19
\$ 303.75 By AS

Bk 2019, Pg 2253

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 19 day of September A.D., 2019, at 11:13 o'clock AM. Recorded in Book 2019 on Pages 2253-2254

Lorise Petsch County Clerk
Fee: \$16.00 By: AS Deputy
Electronically Recorded

Return To: Adams Land Title Company, P.O. Box 1347, Hastings, NE 68902

Warranty Deed

The Grantors, **TRAVIS G. HADEN AND LINDSEY N. HADEN, HUSBAND AND WIFE**, in consideration of One Dollar and other valuable consideration, the receipt of which is hereby acknowledged, and conveys to **GEORGE M. REITZ AND JENNY L. REITZ, HUSBAND AND WIFE**, as joint tenants not as tenants in common, whether one or more, the following described real estate (as described in Neb. Stat. 76-201) in Webster County, Nebraska:

The North Half (N1/2) of Lots One (1), Two (2), Three (3), Four (4) and Five (5), Block Sixteen (16), Original Town of Blue Hill, Webster County, Nebraska, according to the recorded plat thereof.

GRANTORS covenant with GRANTEES that GRANTORS:

- (1) are lawfully seized of such real estate and that it is free from all encumbrances subject to easements, reservations, covenants and restrictions of record and subject to all regular taxes and special assessments;
- (2) have legal power and lawful authority to convey the same;
- (3) warrant and will defend title to the real estate against the lawful claims of all persons.

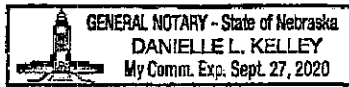
Executed September 3, 2019.


Travis G. Haden


Lindsey N. Haden

STATE OF NEBRASKA }
COUNTY OF *Adams* } ss

On this *3rd* day of *September*, 2019, before me personally appeared
Travis G. Haden and Lindsey N. Haden, husband and wife.



Danielle L. Kelley
Notary Public *Danielle L. Kelley*
My Commission Expires: *Sept. 27, 2020*

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2272	9/19/2019	Base: 91-0002			Affiliated:		Unified:			
Location ID	Sale Number	Useability & Code #		Parcel Number								
000147000	205	4	05	GeoCde	Twn	Rng	Sect	Qrt	Subdly	Area	Blk	Parcel
Date of Sale Assessed Value				4491			00	0	10035		009	0000
Land	Improvements	Total		Date of Sale Property Classification Code								
1,765	46,960	48,725		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 3			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements :	Multiple Improvements :
Construction Date:	Construction Date :	Construction Date :
Floor:	Floor Sq. Ft. :	Floor Sq. Ft. :
Building Cost New:	Cost :	Cost :
Single Family Style:	Residential Condition:	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:
(101) <input type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class:
(102) <input type="checkbox"/> Two Story	(30) <input type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality:	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
QCD; BETWEEN EX-SPOUSE; INCLUDES PARCEL 1720	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

205

FORM
521

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number Select County & County Number		3 Date of Sale/Transfer Mo. <u>9</u> Day <u>19</u> Yr. <u>2019</u>		4 Date of Deed Mo. <u>9</u> Day <u>19</u> Yr. <u>2019</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) <u>Larry G. Zvolanek</u> Street or Other Mailing Address <u>115 N Locust</u> City <u>Osborne</u> State <u>KS</u> Zip Code <u>67473</u> Phone Number _____				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) <u>Anna Marie Eck A/K/A Anna Marie Zvolanek</u> Street or Other Mailing Address <u>906 N Franklin</u> City <u>Red Cloud</u> State <u>NE</u> Zip Code <u>68970</u> Phone Number <u>785-246-6052</u> Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address _____			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input checked="" type="checkbox"/> Quit Claim	<input type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input checked="" type="checkbox"/> Other (Explain) <u>Divorce</u>

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input checked="" type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$48725

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)
 Yes No

18 Address of Property
906 N Franklin St.
Red Cloud NE 68970

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Anna Marie Eck
906 N Franklin St.
Red Cloud, NE 68970

18a No address assigned 18b Vacant land

20 Legal Description
 SEE ATTACHED

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$ - 0 -
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$ 0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 5a

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Anna Marie Eck
Print or Type Name of Grantee or Authorized Representative

Anna Marie Eck
Signature of Grantee or Authorized Representative

Title _____

Phone Number 9-19-19

Date _____

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>19</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>Exempt # 5a</u>	28 Recording Data <u>BK2019, Pg 2272</u>	

LOTS ONE (1), TWO (2), THREE (3), AND FOUR (4), STOKES
SUBDIVISION TO THE CITY OF RED CLOUD, WEBSTER COUNTY,
NEBRASKA;

AND

ALL OF BLOCK NINE (9), KALEY & JACKSON'S ADDITION TO THE
CITY OF RED CLOUD, WEBSTER COUNTY, NEBRASKA, ACCORDING
TO THE RECORDED PLAT THEREOF, AND INCLUDING ALL OF THE
ALLEYS IN SAID BLOCK NINE (9) WHICH HAVE PREVIOUSLY BEEN
VACATED BY THE CITY OF RED CLOUD, NEBRASKA, PURSUANT TO
ORDINANCES DULY AND LAWFULLY PASSED AND ENACTED BY
SAID CITY, BUT EXCEPTING THOSE PARTS OF BLOCK NINE (9) WHICH
HAVE HERETOFORE BEEN CONVEYED TO THE CITY OF RED CLOUD,
NEBRASKA, AS STREET RIGHT-OF-WAY OR TO THE CHICAGO,
BURLINGTON & QUINCY RAILROAD COMPANY AS ADDITIONAL
RIGHT-OF-WAY FOR THE RAILROAD, WEBSTER COUNTY, NEBRASKA.

State of Nebraska } ss.
County of Webster }
Entered on the
numerical index and filed for record in the
Clerk's office of said county this 19 day
of Sept A.D., 2019, at 2:04
o'clock PM. Recorded in Book 2019
on Page 2272
Louise Petch County Clerk
10.00 AS Deputy
Ind ___ Comp ___ Assessor ___ Carded ___

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-19-19
\$ Exempt By AS

QUIT CLAIM DEED

Larry G. Zvolanek, quit claims to Anna Marie Zvolanek, also known as Anna Marie Eck,
all of his interest in the real estate located in Red Cloud, Webster County, Nebraska, legally
described as follows:

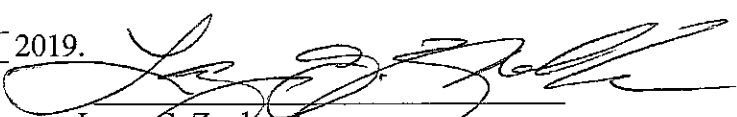
LOTS ONE (1), TWO (2), THREE (3), AND FOUR (4), STOKES
SUBDIVISION TO THE CITY OF RED CLOUD, WEBSTER COUNTY,
NEBRASKA;

AND

ALL OF BLOCK NINE (9), KALEY & JACKSON'S ADDITION TO THE
CITY OF RED CLOUD, WEBSTER COUNTY, NEBRASKA, ACCORDING
TO THE RECORDED PLAT THEREOF, AND INCLUDING ALL OF THE
ALLEYS IN SAID BLOCK NINE (9) WHICH HAVE PREVIOUSLY BEEN
VACATED BY THE CITY OF RED CLOUD, NEBRASKA, PURSUANT TO
ORDINANCES DULY AND LAWFULLY PASSED AND ENACTED BY
SAID CITY, BUT EXCEPTING THOSE PARTS OF BLOCK NINE (9) WHICH
HAVE HERETOFORE BEEN CONVEYED TO THE CITY OF RED CLOUD,
NEBRASKA, AS STREET RIGHT-OF-WAY OR TO THE CHICAGO,
BURLINGTON & QUINCY RAILROAD COMPANY AS ADDITIONAL
RIGHT-OF-WAY FOR THE RAILROAD, WEBSTER COUNTY, NEBRASKA.

for the sum of none. (No real estate validation questionnaire required
pursuant to K.S.A. 79-143e(a), Exception #8)

Dated this 19 day of September 2019.

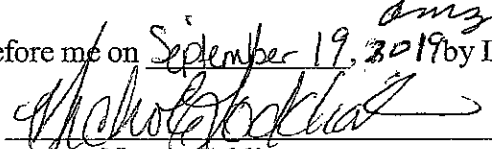

Larry G. Zvolanek

STATE OF NE

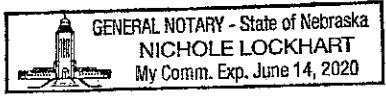
SS:

Webster COUNTY

This instrument was acknowledged before me on September 19, 2019 by Larry G. Zvolanek.


Notary Public

My Appointment Expires: June 14, 2020



Real Estate Transfer Statement

206

To be filed with the Register of Deeds. Read instructions on reverse side. If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name 2 County Number 3 Date of Sale/Transfer 4 Date of Deed

5 Grantor's Name, Address, and Telephone (Please Print) 6 Grantee's Name, Address, and Telephone (Please Print)

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

8 Type of Deed 9 Was the property purchased as part of an IRS like-kind exchange?

10 Type of Transfer 11 Was ownership transferred in full? 12 Was real estate purchased for same use?

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives?

14 What is the current market value of the real property? 15 Was the mortgage assumed?

16 Does this conveyance divide a current parcel of land? 17 Was transfer through a real estate agent or a title company?

18 Address of Property 19 Name and Address of Person to Whom the Tax Statement Should be Sent

20 Legal Description

The North 42.25 feet of Lot Four (4) and the South 57.75 feet of Lot Five (5), Robert's Addition to Guide Rock, Webster County, Nebraska.

Table with 2 columns: Description, Amount. Rows 22-24 showing purchase price, non-real property, and adjusted purchase price.

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 5a

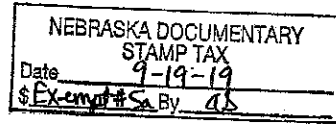
Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Signature block for Kory J. McCracken, Attorney, dated 9/13/19.

Register of Deed's Use Only section with recording date 9/19/19 and recording data BK2019, Pg 2273.

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 19 day of Sept A.D., 2019, at 2:12 o'clock P.M. Recorded in Book 2019 on Page 2273
Louise Peterson County Clerk
L.D. De Deputy
Ind Comp Assessor Carded

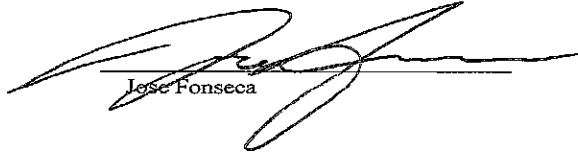


QUITCLAIM DEED

Jose Fonseca, a single person, GRANTOR, whether one or more, in consideration of ONE AND NO/100 DOLLARS (\$1.00) and other valuable consideration receipt of which is hereby acknowledged, quitclaims and conveys to Carmen A. Fonseca, a single person, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

The North 42.25 feet of Lot Four (4) and the South 57.75 feet of Lot Five (5), Robert's Addition to Guide Rock, Webster County, Nebraska.

Executed September 12, 2019.


Jose Fonseca

STATE OF NEBRASKA, COUNTY OF WEBSTER) ss.

The foregoing instrument was acknowledged before me on September 12, 2019, by Jose Fonseca, a single person.



Comm. expires _____


Notary Public

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2336	9/21/2019	Base: 65-0011		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000609800	213	1		Geo Cde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4487			00	0	40010		007	0000
Land	Improvements	Total		Date of Sale Property Classification Code								
140		140		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: GUIDE ROCK (GR)				A) 2	B) 01	C) 1	D) 1	E) 7	F) 2			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements. :	Multiple Improvements. :
Construction Date:	Construction Date :	Construction Date :
Floor:	Floor Sq. Ft. :	Floor Sq. Ft. :
Building Cost New:	Cost :	Cost :
Single Family Style:	Residential Condition:	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:
(101) <input type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class:
(102) <input type="checkbox"/> Two Story	(30) <input type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality:	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
QCD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

213

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name Webster	2 County Number Select County & County Number 91	3 Date of Sale/Transfer Mo. 9 Day 21 Yr. 19	4 Date of Deed Mo. 9 Day 21 Yr. 19
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) STEVEN & JANICE PERRY Street or Other Mailing Address 514 CAROLE PLACE City STONE MOUNTAIN State GA Zip Code 30087 Phone Number 678-717-9818 Email Address		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) PAUL BENCKEN Street or Other Mailing Address 340 HIGH ST. City GUIDE ROCK State NE Zip Code 68942 Phone Number 402-257-3804 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input type="checkbox"/> Improved <input checked="" type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input checked="" type="checkbox"/> Quit Claim	<input type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property? **\$150,**

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes No

18 Address of Property

19 Name and Address of Person to Whom the Tax Statement Should be Sent

18a No address assigned 18b Vacant land

20 Legal Description
lots 11 and 12 Block 7 Vances Addition Guide Rock

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$	600	-
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$		
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	0	00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here

Paul A. Bencken
Print or type Name of Grantee or Authorized Representative

Paul A. Bencken
Signature of Grantee or Authorized Representative

Phone Number _____
Date _____

Register of Deed's Use Only

26 Date Deed Recorded Mo. 9 Day 27 Yr. 19	27 Value of Stamp or Exempt Number \$ 2.25	28 Recording Data BK 2019, pg 2336	For Dept. Use Only
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Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2323	9/23/2019	Base: 91-0074		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000304700	210	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4133			00	0	20005		012	6360
Land	Improvements	Total		Date of Sale Property Classification Code								
5,425		5,425		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: BLUE HILL (BH)				A) 2	B) 01	C) 1	D) 1	E) 6	F) 3			
				Residential				Commercial				
Multiple Improvements:				Multiple Improvements. :				Multiple Improvements. :				
Construction Date:				Construction Date :				Construction Date :				
Floor:				Floor Sq. Ft. :				Floor Sq. Ft. :				
Building Cost New:				Cost :				Cost :				
Single Family Style:				Residential Condition:				Commercial Occupancy Code:				
(100) <input type="checkbox"/> Mobile Home				(10) <input type="checkbox"/> Worn Out				Primary: Other1: Other2:				
(101) <input type="checkbox"/> One Story				(20) <input type="checkbox"/> Badly Worn				Commercial Construction Class:				
(102) <input type="checkbox"/> Two Story				(30) <input type="checkbox"/> Average				(1) <input type="checkbox"/> Fireproof Structural Steel Frame				
(103) <input type="checkbox"/> Split Level				(40) <input type="checkbox"/> Good				(2) <input type="checkbox"/> Reinforced Concrete Frame				
(104) <input type="checkbox"/> 1 1/2 Story				(50) <input type="checkbox"/> Very Good				(3) <input type="checkbox"/> Masonry Bearing Walls				
(111) <input type="checkbox"/> Bi-Level				(60) <input type="checkbox"/> Excellent				(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls				
(106) <input type="checkbox"/> Other								(5) <input type="checkbox"/> Metal Frame and Walls				
Townhouse or Duplex Style:				Residential Quality:				(6) <input type="checkbox"/> Pole Frame				
(301) <input type="checkbox"/> One Story				(10) <input type="checkbox"/> Low				Cost Rank:		Condition:		
(302) <input type="checkbox"/> Two Story				(20) <input type="checkbox"/> Fair				(10) <input type="checkbox"/> Low		(10) <input type="checkbox"/> Worn Out		
(307) <input type="checkbox"/> 1 1/2 Story				(30) <input type="checkbox"/> Average				(20) <input type="checkbox"/> Average		(20) <input type="checkbox"/> Badly Worn		
(308) <input type="checkbox"/> Split Level				(40) <input type="checkbox"/> Good				(30) <input type="checkbox"/> Above Average		(30) <input type="checkbox"/> Average		
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High		(40) <input type="checkbox"/> Good		
(304) <input type="checkbox"/> One Story Duplex				(60) <input type="checkbox"/> Excellent						(50) <input type="checkbox"/> Very Good		
(305) <input type="checkbox"/> Two Story Duplex										(60) <input type="checkbox"/> Excellent		
Assessor's Adjustment to Sale Price (+ or -):												
Assessor Comments and Reason for Adjustment:												
WD												
Comments from						Comments:						
(Continue on back)												

Real Estate Transfer Statement

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FORM
521

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91	2 County Number 91	3 Date of Sale/Transfer Mo. <u>9</u> Day <u>23</u> Yr. <u>2019</u>	4 Date of Deed Mo. <u>9</u> Day <u>23</u> Yr. <u>2019</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Masterpiece Enterprises, LLC Street or Other Mailing Address PO Box 244 City Blue Hill State NE Zip Code 68930		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) City of Blue Hill Street or Other Mailing Address PO Box 277 City Blue Hill State NE Zip Code 68930	
Phone Number (402) 756-2550		Phone Number (402) 756-2056	Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Email Address		Email Address cityofbluehill@gtmc.net	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input type="checkbox"/> Improved <input checked="" type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate – Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract	<input type="checkbox"/> Trustee to Beneficiary
					<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$5,425

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes No

18 Address of Property
802 W Saline St

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Grantee

18a No address assigned 18b Vacant land

20 Legal Description
Lots 1 & 4 Block 12 Original Town Blue Hill, Webster County, Nebraska

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	22	\$	15,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	15,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Tricia Allen, City Clerk/Treasurer (402) 756-2056
 Print or Type Name of Grantee or Authorized Representative Phone Number

Tricia Allen City Clerk/Treasurer
 Signature of Grantee or Authorized Representative Title Date **9/23/19**

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>26</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>33.75</u>	28 Recording Data BK 2019, Pg 2323	

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2321	9/10/2019	Base: 65-0011		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000623501	209	4	05	GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4487	1	9	3	1	40035	000	0000	
Land	Improvements	Total		Date of Sale Property Classification Code								
1,257,040	90,305	1,347,345		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Irrigation Type:				A) 2	B) 01	C) 1	D) 1	E) 7	F) 7			
LCG	ACRES:	VALUE:		LCG	ACRES:	VALUE:						
IRRIGATED 1A1				GRASSLAND 1G1								
1A	89.880	399,520		1G	10.630	14,510						
2A1	6.760	30,050		2G1	18.350	14,325						
2A				2G	4.680	6,390						
3A1				3G1	0.020	25						
3A	19.520	84,035		3G	7.840	9,765						
4A1	0.310	1,325		4G1								
4A	29.020	123,915		4G	38.940	48,340						
DRYLAND 1D1				Shelterbelt/Timber								
1D	122.050	284,985		Accretion								
2D1	17.860	37,595		Waste								
2D	0.060	120		Other								
3D1	18.980	37,200		AG LAND TOTAL		469.860	1,235,510					
3D	23.020	45,120		Roads								
4D1	0.020	40		Farm Sites								
4D	50.940	96,275		Home Sites								
				Recreation								
Dwellings		76,140		Other								
Outbuildings		14,165		Non-AG TOTAL		3.610	21,530					
Assessor's Adjustment to Sale Price (+ or -):						Total Recapture Value:			80,460			
Assessor Comments and Reason for Adjustment:												
DEED OF DISTRIBUTION BY PR; BETWEEN PARENT & CHILD; ALSO INCLUDES 10009,												
10015, & 1114												
Comments from						Comments:						
(Continue on back)												

Real Estate Transfer Statement

209

FORM
521

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91		2 County Number		3 Date of Sale/Transfer Mo. <u>09</u> Day <u>10</u> Yr. <u>2019</u>		4 Date of Deed Mo. <u>09</u> Day <u>10</u> Yr. <u>2019</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Douglas J. Crary Estate - Lauren Taylor Crary, PR Street or Other Mailing Address 2802 35th St, SW City Lehigh Acres State FL Zip Code 33976				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Lauren Taylor Crary, Megan N. Crary & Sarah L. Crary Street or Other Mailing Address 2802 35th St, SW City Lehigh Acres State FL Zip Code 33976			
7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.							

(A) Status	(B) Property Type		(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing <input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed <input type="checkbox"/> Conservator <input type="checkbox"/> Bill of Sale <input type="checkbox"/> Cemetery <input type="checkbox"/> Death Certificate - Transfer on Death		<input checked="" type="checkbox"/> Distribution <input type="checkbox"/> Easement <input type="checkbox"/> Executor	<input type="checkbox"/> Land Contract/Memo <input type="checkbox"/> Lease <input type="checkbox"/> Mineral	<input type="checkbox"/> Partition <input type="checkbox"/> Personal Rep. <input type="checkbox"/> Quit Claim	<input type="checkbox"/> Sheriff <input type="checkbox"/> Trust/Trustee <input type="checkbox"/> Warranty	<input type="checkbox"/> Other _____
9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10 Type of Transfer <input checked="" type="checkbox"/> Distribution <input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Easement <input type="checkbox"/> Exchange		<input type="checkbox"/> Foreclosure <input type="checkbox"/> Gift <input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Life Estate <input type="checkbox"/> Partition	<input type="checkbox"/> Revocable Trust <input type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract

11 Was ownership transferred in full? (If No, explain the division.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		12 Was real estate purchased for same use? (If No, state the intended use.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Aunt or Uncle to Niece or Nephew <input type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Ex-spouse <input type="checkbox"/> Family Corp., Partnership, or LLC <input type="checkbox"/> Grandparents and Grandchild <input checked="" type="checkbox"/> Parents and Child <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Step-parent and Step-child <input type="checkbox"/> Other _____			

14 What is the current market value of the real property? \$1,744,750		15 Was the mortgage assumed? (If Yes, state the amount and interest rate.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No \$ _____ %	
16 Does this conveyance divide a current parcel of land? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
18 Address of Property Rural Property Webster County, NE		19 Name and Address of Person to Whom the Tax Statement Should be Sent same as Grantee	

20 Legal Description
see attached

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	\$	0.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	\$	0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	\$	0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number **15**

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

David B. Garwood (402) 746-3613
Print or Type Name of Grantee or Authorized Representative Phone Number
David B. Garwood Attorney **9-23-19**
Signature of Grantee or Authorized Representative Title Date

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>23</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ Exempt # 15	28 Recording Data BK 2019, Pg 2321

Lots One (1) and Two (2) in the Southeast Quarter (SE $\frac{1}{4}$), and the north Half of the Southeast Quarter (N $\frac{1}{2}$ SE $\frac{1}{4}$) in Section Four (4), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, AND;

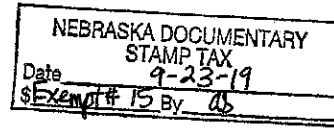
The Southwest Quarter (SW $\frac{1}{4}$) of Section Thirty-four (34), Township two (2) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, including Pivot irrigation system and wells, AND;

The Northwest Quarter (NW $\frac{1}{4}$) and North Half of the Southwest Quarter (N $\frac{1}{2}$ SW $\frac{1}{4}$) of Section Three (3), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, EXCEPT a tract more particularly described as follows: Commencing at the North Quarter corner of said Section 3; thence S00°00'43"W (assumed bearing) on the East line of said West Half, a distance of 394.91 feet to the Place of Beginning and the Beginning of a curve concave to the Southeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S44°53'35"W an arc length of 658.74 feet; thence S07°51'41"W a distance of 182.18 feet; thence S26°06'33"W a distance of 475.90 feet to the beginning of a curve concave to the Southeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S3°33'38"W an arc length of 311.46 feet; thence S08°46'20"E a distance of 113.95 feet; thence S14°00' 14"W a distance of 26.12 feet to the beginning of a curve concave to the Northeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S31°56'43"E an arc length of 1372.50 feet to the east line of the Southwest Quarter of said Section 3; thence N00°00'42"E on the East line of said Southwest Quarter, a distance of 328.21 feet to the center Quarter corner of said Section; thence N00°00' 43"E on the East line of the Northwest Quarter of said Section 3, a distance of 2319.67 feet to the place of beginning AND;

Lot Eleven (11), New Territory of Guide Rock, in the Southwest Quarter (SW $\frac{1}{4}$) of Section Three (3), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, EXCEPT that portion described as follows: Commencing at the Southwest Corner of said Lot Eleven (11) and Place of Beginning; thence N00°12'36"W (assumed bearing) along the west line of said Lot Eleven (11) a distance of 226.41 feet; thence N89°58'34"E parallel with the south line of said Lot Eleven (11) a distance of 163.06 feet to the east line of said Lot Eleven (11); thence S00°00'45"W along said east line a distance of 226.41 feet to the North line of State Street; thence S89°58'34"W along said north line a distance of 162.18 feet to the Place of Beginning; and INCLUDING a perpetual easement for ingress and egress over and across the East sixty feet (E60') of the excepted tract.

BK 2019, Pg 2321

State of Nebraska } ss.
County of Webster }
Entered on the
numerical index and filed for record in the
Clerk's office of said county this 23 day
of Sept A.D.; 20 19 at 3:23
o'clock P. M. Recorded in Book 2019
on Page 2321-2322
Lauree Potach County Clerk
16.00 15 Deputy
Ind. Comp. Assessor Carded



**DEED OF DISTRIBUTION BY
PERSONAL REPRESENTATIVE**

Lauren Taylor Crary, Personal Representative of the Estate of Douglas J. Crary, Deceased, pursuant to appointment by the County Court of Webster County, Nebraska, Case No. PR 18-18, GRANTOR, conveys and releases to Lauren Taylor Crary, Megan N. Crary and Sarah L. Crary, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

Lots One (1) and Two (2) in the Southeast Quarter (SE¼), and the north Half of the Southeast Quarter (N½SE¼) in Section Four (4), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, AND;

The Southwest Quarter (SW¼) of Section Thirty-four (34), Township two (2) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, including Pivot irrigation system and wells, AND;

The Northwest Quarter (NW¼) and North Half of the Southwest Quarter (N½SW¼) of Section Three (3), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, EXCEPT a tract more particularly described as follows: Commencing at the North Quarter corner of said Section 3; thence S00°00'43"W (assumed bearing) on the East line of said West Half, a distance of 394.91 feet to the Place of Beginning and the Beginning of a curve concave to the Southeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S44°53'35"W an arc length of 658.74 feet; thence S07°51'41"W a distance of 182.18 feet; thence S26°06'33"W a distance of 475.90 feet to the beginning of a curve concave to the Southeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S3°33'38"W an arc length of 311.46 feet; thence S08°46'20"E a distance of 113.95 feet; thence S14°00' 14"W a distance of 26.12 feet to the beginning of a curve concave to the Northeast subtended by a radius of 1582.00 feet; thence along said curve the chord of which bears S31°56'43"E an arc length of 1372.50 feet to the east line of the Southwest Quarter of said Section 3; thence N00°00'42"E on the East line of said Southwest Quarter, a distance of 328.21 feet to the center Quarter corner of said Section; thence N00°00' 43"E on the East line of the Northwest Quarter of said Section 3, a distance of 2319.67 feet to the place of beginning AND;

Lot Eleven (11), New Territory of Guide Rock, in the Southwest Quarter (SW¼) of Section Three (3), Township One (1) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska, EXCEPT that portion described as follows: Commencing at the Southwest Corner of said Lot Eleven (11) and Place of Beginning; thence N00°12'36"W (assumed bearing) along the west line of said Lot Eleven (11) a distance of 226.41 feet; thence N89°58'34"E parallel with the south line of said Lot Eleven (11) a distance of 163.06 feet to the east line of said Lot Eleven (11); thence S00°00'45"W along said east line a distance of 226.41 feet

to the North line of State Street; thence S89°58'34"W along said north line a distance of 162.18 feet to the Place of Beginning; and INCLUDING a perpetual easement for ingress and egress over and across the East sixty feet (E60') of the excepted tract;

subject to easements and restrictions of record.

GRANTOR has determined that the GRANTEE is the person entitled to distribution of the real estate from said estate. GRANTOR covenants with GRANTEE that GRANTOR has legal power and lawful authority to convey and release the same.

Executed September 10th 2019.

ESTATE OF DOUGLAS J. CRARY, DECEASED.

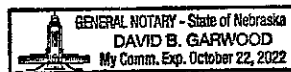
BY: *Lauren Taylor Crary*
Lauren Taylor Crary, Personal Representative

STATE OF NEBRASKA, COUNTY OF WEBSTER) SS

The foregoing instrument was acknowledged before me on September 10th 2019, by Lauren Taylor Crary, Personal Representative of the Estate of Douglas J. Crary, Deceased.

Comm. expires October 22, 2022

David B. Garwood
David B. Garwood, Notary Public



Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2294	9/17/2019	Base: 91-0074		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000343000	208	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4133			00	0	20090		000	0490
Land	Improvements	Total		Date of Sale Property Classification Code								
10,985	342,835	353,820		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: BLUE HILL (BH)				A) 1	B) 03	C) 2	D) 1	E) 6	F) 5			

	Residential	Commercial
Multiple Improvements:	Multiple Improvements. :	Multiple Improvements. : 6
Construction Date:	Construction Date :	Construction Date : 1967
Floor:	Floor Sq. Ft. :	Floor Sq. Ft. : 2,884
Building Cost New:	Cost :	Cost : 987,830
Single Family Style:	Residential Condition:	Commercial Occupancy Code:
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: 313 Other1: Other2:
(101) <input type="checkbox"/> One Story	(20) <input type="checkbox"/> Badly Worn	Commercial Construction Class: 3
(102) <input type="checkbox"/> Two Story	(30) <input type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input checked="" type="checkbox"/> Masonry Bearing Walls
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls
Townhouse or Duplex Style:	Residential Quality:	(6) <input type="checkbox"/> Pole Frame
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank: 20 Condition: 30
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low (10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input checked="" type="checkbox"/> Average (20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average (30) <input checked="" type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High (40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent	(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex		(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
WD	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

208

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91	2 County Number 91	3 Date of Sale/Transfer Mo. 09 Day 17 Yr. 2019	4 Date of Deed Mo. 09 Day 17 Yr. 2019
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) SPTHS Properties Trust Street or Other Mailing Address 255 Washington Street, Suite 300 City Newton State MA Zip Code 02458		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) NE Blue Hill PropCo, LLC Street or Other Mailing Address 702 S. Highway 6 City Gretna State NE Zip Code 68028	
Phone Number (617) 796-8350		Phone Number (917) 324-7393	Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Email Address jfrancis@rmrgroup.com		Email Address shornung@azriahealth.com	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type			(C)
<input checked="" type="checkbox"/> Improved	<input type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mineral Interests-Nonproducing	<input type="checkbox"/> State Assessed
<input type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> Exempt
<input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Recreational		<input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate -- Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
			<input type="checkbox"/> Other (Explain) _____	

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
550,279

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes _____ No

18 Address of Property
414 North Wilson Street, P.O. Box 156, Blue Hill, NE

19 Name and Address of Person to Whom the Tax Statement Should be Sent
c/o Azria Health Management, LLC
702 S. Highway 6
Gretna, NE 68028

18a No address assigned 18b Vacant land

20 Legal Description
See attached Exhibit A.

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	22	\$	550,279.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	550,279.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here **Steven Hornung**
Print or Type Name of Grantee or Authorized Representative

[Signature] **Manager**
Signature of Grantee or Authorized Representative Title

Phone Number **09/ /2019**
Date

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. 9 Day 23 Yr. 19	27 Value of Stamp or Exempt Number \$ 1239.75	28 Recording Data BK 2019, Pg 2294	

Grantee—Retain a copy of this document for your records.

Blue Hill Care Center
414 North Wilson Street, P.O. Box 156
Blue Hill, NE

EXHIBIT A

LEGAL DESCRIPTION

A tract of land located in the Southeast Quarter (SE 1/4) of Section 4, Township 4 North, Range 10 West of the 6th P.M., Webster County, Nebraska, being described as follows:

Commencing at the Southeast corner of said Section 4; thence S 89° 32' 45" W (assumed bearing) along the south line said Southeast Quarter, 49.20 feet; thence N 00° 25' 06" W 33.00 feet along the west right-of-way line of U.S. Highway No. 281 as described in Deed Record Book 86, Page 1097 to the true place of beginning; thence S 89° 32' 45" W, parallel with and 33.00 feet north of said south line Southeast Quarter 254.16 feet; thence N 00° 00' 00" E, parallel with and 303.60 feet west of the east line said Southeast Quarter, 512.50 feet; thence N 89° 32' 45" E, parallel with and 545.50 feet north of said south line Southeast Quarter 200.14 feet to the west right-of-way line of said U.S. Highway No. 281 being 103.46 feet west of said east line Southeast Quarter; thence S 21° 59' 24" E along said right-of-way line, 136.75 feet to a point 52.25 feet west of said east line Southeast Quarter; thence S 00° 25' 06" E along said right-of-way line, 385.28 feet to the place of beginning.

Index _____
Computer _____
Assessor _____
Carded _____

NEBRASKA DOCUMENTARY
STAMP TAX
Date: 09/23/19
\$1239.75 By AS

State of Nebraska }
County of Webster } ss.
Entered on the
numerical index and filed for record in the
Clerk's office of said county this 23 day
of September A.D., 2019, at 10:29
o'clock AM. Recorded in Book 2019
on Pages 2294-2296
Louise Petsch County Clerk
Fee: \$22.00 By: AS Deputy
Electronically Recorded

WARRANTY DEED

THIS WARRANTY DEED, made on the 17 day of September, 2019, by **SPTIHS PROPERTIES TRUST**, a Maryland real estate investment trust (hereinafter "Grantor"), having an address c/o Senior Housing Properties Trust, 400 Centre Street, Newton, Massachusetts 02458, in favor of **NE BLUE HILL PROPCO, LLC**, a Nebraska limited liability company (hereinafter "Grantee"), having an address c/o Azria Health Management, LLC, 702 S. Highway 6, Gretna, NE 68028.

WITNESSETH:

THAT Grantor, in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, to it paid by Grantee, the receipt of which is hereby acknowledged, does by these presents, grant unto the said Grantee, its successors and assigns, with WARRANTY COVENANTS, the parcel of land lying, being situated in the City of Blue Hill, County of Webster, State of Nebraska, and described on Exhibit A attached hereto and incorporated herein by reference.

This conveyance of the Real Estate is made subject to (i) any and all rights-of-way, liens, claims, commitments, covenants, conditions and restrictions, agreements and encumbrances of record, and easements visible upon the Property (ii) any and all matters that would be disclosed by an accurate survey or physical inspection of the Real Estate, (iii) the rights of tenants under the leases, and (iv) the lien for non-delinquent real estate taxes and assessments.

Filed By
Chicago Title
191013 NP

IN WITNESS WHEREOF, the said Grantor has executed this Warranty Deed the day and year above written.

GRANTOR:

SPTIHS PROPERTIES TRUST

By: J. Francis
Name: Jennifer F. Francis
Its: President

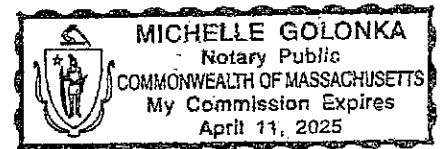
Acknowledgement

Commonwealth of Massachusetts

County of Middlesex

This instrument was acknowledged before me on September 12, 2019 by Jennifer F. Francis, as President of SPTIHS PROPERTIES TRUST known to me to be the same person whose name is subscribed to the foregoing Warranty Deed, appeared before me this day in person and acknowledged that she signed and delivered said Warranty Deed as such President, as her free and voluntary act and deed of said entity for the uses and purposes set forth herein.

M. Golonka
Notary Public Michelle Golonka
My Commission expires: 4/11/25



Prepared by:

Ashley H. Brooks
Sullivan & Worcester LLP
One Post Office Square
Boston, MA 02109

(617) 338-2412

EXHIBIT A

LEGAL DESCRIPTION

A tract of land located in the Southeast Quarter (SE 1/4) of Section 4, Township 4 North, Range 10 West of the 6th P.M., Webster County, Nebraska, being described as follows:

Commencing at the Southeast corner of said Section 4; thence S 89° 32' 45" W (assumed bearing) along the south line said Southeast Quarter, 49.20 feet; thence N 00° 25' 06" W 33.00 feet along the west right-of-way line of U.S. Highway No. 281 as described in Deed Record Book 86, Page 1097 to the true place of beginning; thence S 89° 32' 45" W, parallel with and 33.00 feet north of said south line Southeast Quarter 254.16 feet; thence N 00° 00' 00" E, parallel with and 303.60 feet west of the east line said Southeast Quarter, 512.50 feet; thence N 89° 32' 45" E, parallel with and 545.50 feet north of said south line Southeast Quarter 200.14 feet to the west right-of-way line of said U.S. Highway No. 281 being 103.46 feet west of said east line Southeast Quarter; thence S 21° 59' 24" E along said right-of-way line, 136.75 feet to a point 52.25 feet west of said east line Southeast Quarter; thence S 00° 25' 06" E along said right-of-way line, 385.28 feet to the place of beginning.

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2277	9/20/2019	Base: 91-0002		Affiliated:		Unified:						
Location ID		Sale Number		Useability & Code #		Parcel Number								
000172500		207		1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4371			00	0	10130		000	0000		
Land		Improvements		Total		Date of Sale Property Classification Code								
1,625		89,455		91,080		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: RED CLOUD (RC)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 2					
				Residential				Commercial						
Multiple Improvements:				Multiple Improvements. :				Multiple Improvements. :						
Construction Date:				Construction Date : 1977				Construction Date :						
Floor:				Floor Sq. Ft. : 1,344				Floor Sq. Ft. :						
Building Cost New:				Cost : 185,905				Cost :						
Single Family Style: 101				Residential Condition: 40				Commercial Occupancy Code:						
(100) <input type="checkbox"/> Mobile Home				(10) <input type="checkbox"/> Worn Out				Primary: Other1: Other2:						
(101) <input checked="" type="checkbox"/> One Story				(20) <input type="checkbox"/> Badly Worn				Commercial Construction Class:						
(102) <input type="checkbox"/> Two Story				(30) <input type="checkbox"/> Average				(1) <input type="checkbox"/> Fireproof Structural Steel Frame						
(103) <input type="checkbox"/> Split Level				(40) <input checked="" type="checkbox"/> Good				(2) <input type="checkbox"/> Reinforced Concrete Frame						
(104) <input type="checkbox"/> 1 1/2 Story				(50) <input type="checkbox"/> Very Good				(3) <input type="checkbox"/> Masonry Bearing Walls						
(111) <input type="checkbox"/> Bi-Level				(60) <input type="checkbox"/> Excellent				(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls						
(106) <input type="checkbox"/> Other								(5) <input type="checkbox"/> Metal Frame and Walls						
Townhouse or Duplex Style:				Residential Quality: 30				(6) <input type="checkbox"/> Pole Frame						
(301) <input type="checkbox"/> One Story				(10) <input type="checkbox"/> Low				Cost Rank:		Condition:				
(302) <input type="checkbox"/> Two Story				(20) <input type="checkbox"/> Fair				(10) <input type="checkbox"/> Low		(10) <input type="checkbox"/> Worn Out				
(307) <input type="checkbox"/> 1 1/2 Story				(30) <input checked="" type="checkbox"/> Average				(20) <input type="checkbox"/> Average		(20) <input type="checkbox"/> Badly Worn				
(308) <input type="checkbox"/> Split Level				(40) <input type="checkbox"/> Good				(30) <input type="checkbox"/> Above Average		(30) <input type="checkbox"/> Average				
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High		(40) <input type="checkbox"/> Good				
(304) <input type="checkbox"/> One Story Duplex				(60) <input type="checkbox"/> Excellent						(50) <input type="checkbox"/> Very Good				
(305) <input type="checkbox"/> Two Story Duplex										(60) <input type="checkbox"/> Excellent				
Assessor's Adjustment to Sale Price (+ or -):														
Assessor Comments and Reason for Adjustment:														
WD														
Comments from						Comments:								
(Continue on back)														

Real Estate Transfer Statement

207

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the applicable item number.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name	2 County Number WEBSTER - 91	3 Date of Sale/Transfer Mo. <u>9</u> Day <u>20</u> Yr. <u>2019</u>	4 Date of Deed Mo. <u>9</u> Day <u>16</u> Yr. <u>2019</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Jason Heldt and Stacie Heldt Street or Other Mailing Address <u>1371 River Road</u> City Red Cloud State NE Zip Code 68970 Phone Number <u>308-249-5748</u> Email Address n/a		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Donna Marie Wilson Street or Other Mailing Address 1040 N Franklin St City Red Cloud State NE Zip Code 68970 Phone Number <u>402-879-9063</u> Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address n/a	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Agricultural <input type="checkbox"/> Recreational	<input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing <input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Corrective	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty		

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Other (Explain) _____	

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No _____

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No _____

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property?
\$139,000

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)
 Yes **Gary Thompson Agency** No

18 Address of Property
**1040 N Franklin St
 Red Cloud, NE 68970**

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Grantee

18a No address assigned 18b Vacant land

20 Legal Description
Lots Twenty-two (22), Twenty-three (23), Twenty-four (24), Twenty-five (25), Twenty-six (26) and Twenty-seven (27), Stokes Subdivision of Annex Lot Five (5) to Red Cloud, Webster County, Nebraska

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	22	\$	139,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	139,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

Donna Marie Wilson
 Print or Type Name of Grantee or Authorized Representative

Donna Marie Wilson
 Signature of Grantee or Authorized Representative

Grantee
 Phone Number **9/ /2019**
 Date

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>20</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>312.75</u>	28 Recording Data <u>BK 2019, Pg 2277</u>	

State of Nebraska } ss.
County of Webster }

Entered on the numerical index and filed for record in the Clerk's office of said county this 20 day of Sept A.D., 20 19, at 3:56 o'clock PM. Recorded in Book 2019 on Page 2277
Louise Petch County Clerk
10.00 ab Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-20-19
\$ 312.75 By ab

Return to:
Southern Title, LLC
P O Box 221
Red Cloud, NE 68970

WARRANTY DEED

Jason Heldt and Stacie Heldt, husband and wife, Grantors, in consideration of ONE DOLLAR (\$1.00) and other valuable consideration received from Grantee, Donna Marie Wilson, convey to Grantee, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

Lots Twenty-two (22), Twenty-three (23), Twenty-four (24), Twenty-five (25), Twenty-six (26) and Twenty-seven (27), Stokes Subdivision of Annex Lot Five (5) to Red Cloud, Webster County, Nebraska

Grantors covenant, jointly and severally, with Grantee that Grantors:

- (1) are lawfully seised of such real estate and that it is free from encumbrances;
- (2) have legal power and lawful authority to convey the same;
- (3) warrant and will defend title to the real estate against the lawful claims of all persons.

Executed September 16, 2019.

Jason V. Heldt
Jason Heldt

Stacie Heldt
Stacie Heldt

STATE OF NEBRASKA)
) ss.
COUNTY OF WEBSTER)

The foregoing instrument was acknowledged before me on September 16, 2019 by Jason Heldt and Stacie Heldt, husband and wife.

GENERAL NOTARY - State of Nebraska
TERESA L. THEOBALD
My Comm. Exp. August 27, 2021

Teresa L. Theobald
Notary Public

Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code								
91	2019	2337	8/26/2019	Base: 91-0074		Affiliated:		Unified:				
Location ID	Sale Number	Useability & Code #		Parcel Number								
000326400	214	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value				4133			00	0	20035		002	8780
Land	Improvements	Total		Date of Sale Property Classification Code								
2,645	55,065	57,710		Status	Property Type	Zoning	Location	City Size	Parcel Size			
Assessor Location: BLUE HILL (BH)				A) 1	B) 01	C) 1	D) 1	E) 6	F) 1			

		Residential	Commercial
Multiple Improvements:	Multiple Improvements. :		Multiple Improvements. :
Construction Date:	Construction Date : 1925		Construction Date :
Floor:	Floor Sq. Ft. : 1,204		Floor Sq. Ft. :
Building Cost New:	Cost : 164,930		Cost :
Single Family Style: 101	Residential Condition: 25	Commercial Occupancy Code:	
(100) <input type="checkbox"/> Mobile Home	(10) <input type="checkbox"/> Worn Out	Primary: Other1: Other2:	
(101) <input checked="" type="checkbox"/> One Story	(20) <input checked="" type="checkbox"/> Badly Worn	Commercial Construction Class:	
(102) <input type="checkbox"/> Two Story	(30) <input checked="" type="checkbox"/> Average	(1) <input type="checkbox"/> Fireproof Structural Steel Frame	
(103) <input type="checkbox"/> Split Level	(40) <input type="checkbox"/> Good	(2) <input type="checkbox"/> Reinforced Concrete Frame	
(104) <input type="checkbox"/> 1 1/2 Story	(50) <input type="checkbox"/> Very Good	(3) <input type="checkbox"/> Masonry Bearing Walls	
(111) <input type="checkbox"/> Bi-Level	(60) <input type="checkbox"/> Excellent	(4) <input type="checkbox"/> Wood or Steel Framed Ext. Walls	
(106) <input type="checkbox"/> Other		(5) <input type="checkbox"/> Metal Frame and Walls	
Townhouse or Duplex Style:	Residential Quality: 40	(6) <input type="checkbox"/> Pole Frame	
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low	Cost Rank:	Condition:
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair	(10) <input type="checkbox"/> Low	(10) <input type="checkbox"/> Worn Out
(307) <input type="checkbox"/> 1 1/2 Story	(30) <input type="checkbox"/> Average	(20) <input type="checkbox"/> Average	(20) <input type="checkbox"/> Badly Worn
(308) <input type="checkbox"/> Split Level	(40) <input checked="" type="checkbox"/> Good	(30) <input type="checkbox"/> Above Average	(30) <input type="checkbox"/> Average
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good	(40) <input type="checkbox"/> High	(40) <input type="checkbox"/> Good
(304) <input type="checkbox"/> One Story Duplex	(60) <input type="checkbox"/> Excellent		(50) <input type="checkbox"/> Very Good
(305) <input type="checkbox"/> Two Story Duplex			(60) <input type="checkbox"/> Excellent

Assessor's Adjustment to Sale Price (+ or -):	
Assessor Comments and Reason for Adjustment:	
WD	
Comments from	Comments:
(Continue on back)	

Real Estate Transfer Statement

214

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer		4 Date of Deed	
WEBSTER - 91				Mo. 08 Day 26 Yr. 2019		Mo. 09 Day 23 Yr. 2019	
5 Grantor's Name, Address, and Telephone (Please Print)				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) Estate of Phyllis I. Hartman, Janice K. Jelinek - PR				Grantee's Name (Buyer) Matthew & Summer Lukasiewicz			
Street or Other Mailing Address 615 Ivy Hall Place				Street or Other Mailing Address 202 W Nemaha St			
City Grand Island		State NE		Zip Code 68801		City Blue Hill	
						State NE	
						Zip Code 68930	
Phone Number (308) 382-6417		Phone Number (402) 984-4020		Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Email Address		Email Address				Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type			(C)
<input checked="" type="checkbox"/> Improved	<input checked="" type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mineral Interests-Nonproducing	<input type="checkbox"/> State Assessed
<input type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> Exempt
<input type="checkbox"/> IOLL	<input type="checkbox"/> Commercial	<input type="checkbox"/> Recreational		<input type="checkbox"/> Mobile Home

8 Type of Deed

<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Bill of Sale	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Auction	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input checked="" type="checkbox"/> Sale	<input type="checkbox"/> Trustee to Beneficiary
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract
				<input type="checkbox"/> Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No _____

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No _____

13 Was the transfer between relatives, or if to a trustee, are the trustee and beneficiary relatives? (If Yes, check the appropriate box.)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse	
		<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child	

14 What is the current market value of the real property? _____

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes Montgomery Auction & S No

18 Address of Property
202 W Nemaha St
Blue Hill, NE 68930

18a No address assigned 18b Vacant land

19 Name and Address of Person to Whom the Tax Statement Should be Sent
same as Grantee

20 Legal Description
Lots One (1) and Two (2), Block Two (2), Grussell's Sub-division of Rohrer's Addition and the East Ninety (90) feet of Lot Five (5), Hawley's Sub-division of Rohrer's Addition to the Village of Blue Hill, Webster County, Nebraska.

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	\$ 70,000.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	\$ 0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	\$ 70,000.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

David B. Garwood (402) 746-3613

Print or Type Name of Grantee or Authorized Representative _____ Phone Number _____

David B. Garwood Attorney _____ Date 9-30-19

Signature of Grantee or Authorized Representative _____ Title _____

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>30</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>157.50</u>	28 Recording Data <u>BK 2019, Pg 2337</u>	

Grantee—Retain a copy of this document for your records.

STATE OF NEBRASKA]
]ss
COUNTY OF HALL]

The foregoing instrument was acknowledged before me on September 23, 2019, by Janice K. Jelinek, Personal Representative the Estate of Phyllis I. Hartman, known to me personally or who has produced sufficient evidence of identification to me.

Vincent L Dowding
Notary Public



Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code													
91	2019	2324	9/21/2019	Base: 91-0002			Affiliated:		Unified:								
Location ID		Sale Number		Useability & Code #		Parcel Number											
000806201		211		4 05		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel			
Date of Sale Assessed Value						4373	2	10	4	4	50005	1	022	0000			
Land		Improvements		Total		Date of Sale Property Classification Code											
11,675				11,675		Status	Property Type	Zoning	Location	City Size	Parcel Size						
Irrigation Type:						A) 2	B) 05	C) 1	D) 1	E) 8	F) 6						
LCG			ACRES:			VALUE:			LCG			ACRES:			VALUE:		
IRRIGATED 1A1									GRASSLAND 1G1								
1A									1G								
2A1									2G1								
2A									2G								
3A1									3G1								
3A									3G								
4A1									4G1								
4A									4G								
DRYLAND 1D1									Shelterbelt/Timber								
1D			5.000			11,675			Accretion								
2D1									Waste								
2D									Other								
3D1									AG LAND TOTAL			5.000			11,675		
3D									Roads								
4D1									Farm Sites								
4D									Home Sites								
									Recreation								
Dwellings									Other								
Outbuildings									Non-AG TOTAL								

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value: 16,450
Assessor Comments and Reason for Adjustment:	
WD - BETWEEN BROTHER AND SISTERS	
Comments from	Comments:

(Continue on back)

Real Estate Transfer Statement

• To be filed with the Register of Deeds. • Read instructions on reverse side. 211
 • If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name	2 County Number WEBSTER - 91	3 Date of Sale/Transfer Mo. <u>09</u> Day <u>21</u> Yr. <u>2019</u>	4 Date of Deed Mo. <u>09</u> Day <u>21</u> Yr. <u>2019</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Virginia Kepler, Joann D. Schriener, Steven & Deanne Schriener Street or Other Mailing Address 1014 Rd N City Red Cloud State NE Zip Code 68970 Phone Number (402) 460-9561 Email Address		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Virgina L. Kepler and Steven D. Schriener Street or Other Mailing Address 1011 East 65th ST Place City Kearney State NE Zip Code 68847 Phone Number (308) 440-2736 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type	(C)
<input type="checkbox"/> Improved <input checked="" type="checkbox"/> Unimproved <input type="checkbox"/> IOLL	<input type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Agricultural <input type="checkbox"/> Recreational <input type="checkbox"/> Mineral Interests-Nonproducing <input type="checkbox"/> Mineral Interests-Producing <input type="checkbox"/> State Assessed <input type="checkbox"/> Exempt	<input type="checkbox"/> Mobile Home

8 Type of Deed Conservator Distribution Land Contract/Memo Partition Sheriff Other _____
 Bill of Sale Corrective Easement Lease Personal Rep. Trust/Trustee
 Cemetery Death Certificate - Transfer on Death Executor Mineral Quit Claim Warranty

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer Distribution Foreclosure Irrevocable Trust Revocable Trust Transfer on Death
 Auction Easement Gift Life Estate Sale Trustee to Beneficiary
 Court Decree Exchange Grantor Trust Partition Satisfaction of Contract Other (Explain) _____

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No _____

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No _____

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)
 Yes No Aunt or Uncle to Niece or Nephew Family Corp., Partnership, or LLC Self Other _____
 Brothers and Sisters Grandparents and Grandchild Spouse
 Ex-spouse Parents and Child Step-parent and Step-child

14 What is the current market value of the real property? _____

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes No

18 Address of Property
 Rural Property
 Webster County, NE

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Ronald D. Schriener
 101 First St
 Blue Hill, NE 68930

18a No address assigned **18b** Vacant land

20 Legal Description
 The North 525 feet of County Surveyor's Lot Twelve (12) in the Southeast Quarter (SE1/4) of Section Four (4), Township Two (2) North, Range Ten (10), West of the 6th P.M., Webster County, Nebraska, AND
 Lots One (1), Two (2), Three (3), Four (4), Five (5), Six (6), Seven (7) and Eight (8), Block Twenty-two (22), Original Town of Cowles, Webster County, Nebraska.

21 If agricultural, list total number of acres _____

22 Total purchase price, including any liabilities assumed	\$	0.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	\$	0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	\$	0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 7.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

David B. Garwood (402) 746-3613
 Print or Type Name of Grantee or Authorized Representative Phone Number
 Signature of Grantee or Authorized Representative Title **Attorney** Date **9-26-19**

Register of Deed's Use Only		For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>27</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ Exempt # 7	28 Recording Data BK2019, Pg 2324

BK2019 Pg 2324

State of Nebraska }
County of Webster } ss.

Entered on the numerical index and filed for record in the Clerk's office of said county this 27 day of Sept A.D., 2019, at 10:22 o'clock 9 A.M. Recorded in Book 2019 on Page 2324
Louise Petersch County Clerk
10.00 Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-27
\$ Exempt # 7 By ad

WARRANTY DEED

Virginia L. Kepler, a single person; Joann D. Schriener, a single person; and Steven D. Schriener and Deanne Schriener, husband and wife, GRANTORS, in consideration of ONE AND NO/100 DOLLARS (\$1.00), and EXCHANGE OF PROPERTY, receipt of which is hereby acknowledged, convey to Virginia L. Kepler and Steven D. Schriener, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

The North 525 feet of County Surveyor's Lot Twelve (12) in the Southeast Quarter (SE¼) of Section Four (4), in Township Two (2) North, Range Ten (10), West of the 6th P.M., Webster County, Nebraska, AND

Lots One (1), Two (2), Three (3), Four (4), Five (5), Six (6), Seven (7) and Eight (8), Block Twenty-two (22), Original Town of Cowles, Webster County, Nebraska.

GRANTORS covenant with the GRANTEES that GRANTORS:

- (1) are lawfully seized of such real estate and that it is free from encumbrances, except roads and highways, easements and restrictions of record;
- (2) have legal power and lawful authority to convey the same;
- (3) warrant and will defend title to the real estate against the lawful claims of all persons.

Executed: September 21, 2019

Virginia L. Kepler
Virginia L. Kepler


Joann D. Schriener
Joann D. Schriener

Steven D. Schriener
Steven D. Schriener

Deanne Schriener
Deanne Schriener

STATE OF NEBRASKA, COUNTY OF WEBSTER) ss.

The foregoing instrument was acknowledged before me on September 21, 2019, by Virginia L. Kepler, a single person; Joann D. Schriener, a single person; and Steven D. Schriener.


Comm. expires 10-22-2022

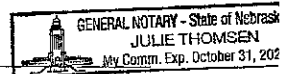
David E. Garwood
Notary Public

STATE OF NEBRASKA, COUNTY OF BUFFALO) ss.

The foregoing instrument was acknowledged before me on September 23, 2019, by Deanne Schriener.

Comm. expires Oct. 31, 2021

Julie Thomsen
Notary Public



000800100

rd

460.255 Feet

724.6 Feet

134.417 Feet

129.928 Feet

RR

457.267 Feet
000806201

Sec 4

Town 2

Range 10W

530.371 Feet

1,833.053 Feet
000806200

521.23 Feet

Lengths 7.616 Feet
7.616 Feet

320.851 Feet

539.2
N

Agricultural Land Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code										
91	2019	2325	9/21/2019	Base: 91-0002			Affiliated:		Unified:					
Location ID		Sale Number		Useability & Code #		Parcel Number								
000806200		212		4	05	GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel
Date of Sale Assessed Value						4373	2	10	4	4	50005	022	0000	
Land		Improvements		Total		Date of Sale Property Classification Code								
1,870		12,470		14,340		Status	Property Type		Zoning	Location	City Size	Parcel Size		
Irrigation Type:						A) 1	B) 01		C) 1	D) 1	E) 8	F) 3		
LCG		ACRES:		VALUE:		LCG		ACRES:		VALUE:				
IRRIGATED 1A1						GRASSLAND 1G1								
1A						1G								
2A1						2G1								
2A						2G								
3A1						3G1								
3A						3G								
4A1						4G1								
4A						4G								
DRYLAND 1D1						Shelterbelt/Timber								
1D						Accretion								
2D1						Waste								
2D						Other								
3D1						AG LAND TOTAL								
3D						Roads								
4D1						Farm Sites								
4D						Home Sites								
						Recreation								
Dwellings					4,990	Other								
Outbuildings					7,480	Non-AG TOTAL								

Assessor's Adjustment to Sale Price (+ or -):	Total Recapture Value:
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Assessor Comments and Reason for Adjustment:
 WD - BETWEEN BROTHER AND SISTERS

Comments from	Comments:
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(Continue on back)

Real Estate Transfer Statement

212

• To be filed with the Register of Deeds. • Read instructions on reverse side.
• If additional space is needed, add an attachment and identify the item.

The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name WEBSTER - 91		2 County Number		3 Date of Sale/Transfer Mo. <u>09</u> Day <u>21</u> Yr. <u>2019</u>		4 Date of Deed Mo. <u>09</u> Day <u>21</u> Yr. <u>2019</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Virginia Kepler, Joann D. Schriener, Steven & Deanne Schriener Street or Other Mailing Address 1011 East 65th ST Place City Kearney State NE Zip Code 68847 Phone Number (308) 440-2736 Email Address				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Joann D. Schriener Street or Other Mailing Address 1014 Rd N City Red Cloud State NE Zip Code 68970 Phone Number (402) 460-9561 Is the grantee a 501(c)(3) organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, is the grantee a 509(a) foundation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Email Address			

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.

(A) Status	(B) Property Type			(C)
<input checked="" type="checkbox"/> Improved	<input type="checkbox"/> Single Family	<input type="checkbox"/> Industrial	<input type="checkbox"/> Mineral Interests-Nonproducing	<input type="checkbox"/> State Assessed
<input type="checkbox"/> Unimproved	<input type="checkbox"/> Multi-Family	<input checked="" type="checkbox"/> Agricultural	<input type="checkbox"/> Mineral Interests-Producing	<input type="checkbox"/> Exempt
<input type="checkbox"/> IOLL	<input type="checkbox"/> Commercial	<input type="checkbox"/> Recreational		<input type="checkbox"/> Mobile Home

8 Type of Deed

<input checked="" type="checkbox"/> Bill of Sale	<input type="checkbox"/> Conservator	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition	<input type="checkbox"/> Sheriff	<input type="checkbox"/> Other _____
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Corrective	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease	<input type="checkbox"/> Personal Rep.	<input type="checkbox"/> Trust/Trustee	
<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Mineral	<input type="checkbox"/> Quit Claim	<input checked="" type="checkbox"/> Warranty		

9 Was the property purchased as part of an IRS like-kind exchange? (I.R.C. § 1031 Exchange)
 Yes No

10 Type of Transfer

<input type="checkbox"/> Auction	<input type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust	<input type="checkbox"/> Transfer on Death
<input type="checkbox"/> Court Decree	<input checked="" type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust	<input type="checkbox"/> Life Estate	<input type="checkbox"/> Sale	<input type="checkbox"/> Trustee to Beneficiary
		<input type="checkbox"/> Partition	<input type="checkbox"/> Satisfaction of Contract	<input type="checkbox"/> Other (Explain) _____	

11 Was ownership transferred in full? (If No, explain the division.)
 Yes No _____

12 Was real estate purchased for same use? (If No, state the intended use.)
 Yes No _____

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle to Niece or Nephew	<input type="checkbox"/> Family Corp., Partnership, or LLC	<input type="checkbox"/> Self	<input type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> Brothers and Sisters	<input type="checkbox"/> Grandparents and Grandchild	<input type="checkbox"/> Spouse		
	<input type="checkbox"/> Ex-spouse	<input type="checkbox"/> Parents and Child	<input type="checkbox"/> Step-parent and Step-child		

14 What is the current market value of the real property? _____

15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
 Yes No \$ _____ %

16 Does this conveyance divide a current parcel of land?
 Yes No

17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.) Yes No

18 Address of Property
Rural Property
Webster County, NE

19 Name and Address of Person to Whom the Tax Statement Should be Sent
Ronald D. Schriener
101 First St
Blue Hill, NE 68930

18a No address assigned 18b Vacant land

20 Legal Description
County Surveyor's Lot Twelve (12), EXCEPT the North 525 feet thereof and County Surveyor's Lot Fifteen (15) both in the Southeast Quarter (SE1/4) of Section Four (4), in Township Two (2) North, Range Ten (10), West of the 6th P.M., Webster County, Nebraska.

21 If agricultural, list total number of acres _____.

22 Total purchase price, including any liabilities assumed	22	\$	0.00
23 Was non-real property included in the purchase? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.)	23	\$	0.00
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	0.00

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 7.

Under penalties of law, I declare that I have examined this statement and that it is, to the best of my knowledge and belief, true, complete, and correct, and that I am duly authorized to sign this statement.

sign here **David B. Garwood** (402) 746-3613
Print or Type Name of Grantee or Authorized Representative Phone Number
Attorney
Signature of Grantee or Authorized Representative Title Date **9-26-19**

Register of Deed's Use Only			For Dept. Use Only
26 Date Deed Recorded Mo. <u>9</u> Day <u>27</u> Yr. <u>19</u>	27 Value of Stamp or Exempt Number \$ <u>Exempt # 7</u>	28 Recording Data <u>BK 2019, Pg 2325</u>	

BK2019, Pg 2325

State of Nebraska }
County of Webster } ss.

Entered on the numerical index and filed for record in the Clerk's office of said county this 27 day of Sept A.D., 2019, at 10:23 o'clock AM. Recorded in Book 2019 on Page 2325
Loise Petrich County Clerk
10.00 Deputy
Ind Comp Assessor Carded

NEBRASKA DOCUMENTARY
STAMP TAX
Date 9-27-19
\$Exempt By DL

WARRANTY DEED

Virginia L. Kepler, a single person; Joann D. Schriener, a single person; and Steven D. Schriener and Deanne Schriener, husband and wife, GRANTORS, in consideration of ONE AND NO/100 DOLLARS (\$1.00), and EXCHANGE OF PROPERTY, receipt of which is hereby acknowledged, convey to Joann D. Schriener, GRANTEE, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

County Surveyor's Lot Twelve (12), EXCEPT the North 525 feet thereof and County Surveyor's Lot Fifteen (15) both in the Southeast Quarter (SE¼) of Section Four (4), in Township Two (2) North, Range Ten (10), West of the 6th P.M., Webster County, Nebraska.

- GRANTORS covenant with the GRANTEE that GRANTORS:
- (1) are lawfully seized of such real estate and that it is free from encumbrances, except roads and highways, easements and restrictions of record;
 - (2) have legal power and lawful authority to convey the same;
 - (3) warrant and will defend title to the real estate against the lawful claims of all persons.

Executed: September 21, 2019

Virginia L. Kepler
Virginia L. Kepler

Joann D. Schriener
Joann D. Schriener

Steven D. Schriener
Steven D. Schriener

Deanne Schriener
Deanne Schriener

STATE OF NEBRASKA, COUNTY OF WEBSTER) ss.

The foregoing instrument was acknowledged before me on September 21, 2019, by Virginia L. Kepler, a single person; Joann D. Schriener, a single person; and Steven D. Schriener.

GENERAL NOTARY - State of Nebraska
DAVID B. GARWOOD
My Comm. Exp. October 22, 2022

Comm. expires 10-22-2022

David B. Garwood
Notary Public

STATE OF NEBRASKA, COUNTY OF BUFFALO) ss.

The foregoing instrument was acknowledged before me on September 23, 2019, by Deanne Schriener.

GENERAL NOTARY - State of Nebraska
JULIE THOMSEN
My Comm. Exp. October 31, 2021

Comm. expires Oct. 31, 2021

Julie Thomsen
Notary Public

GENERAL NOTARY - State of Nebraska
JULIE THOMSEN
My Comm. Exp. October 31, 2021