

# Agricultural Land Sales Worksheet

Cnty No	Book	Page	Sale Date	School District Code									
91	2024	1270	7/8/2024	Base: 65-0011					Affiliated:			Unified:	
Location ID	Sale Number	Usability & Code #		Parcel Number									
001115300	109	4	05	GeoCode	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4375	2	9	36	4	00000	1	000	1750	
Land	Improvements	Total		Date of Sale Property Classification Code									
229,850		229,850		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				GRASSLAND 1G1	92.000	142,600							
1A				1G	17.000	26,350							
2A1				2G1	42.000	60,900							
2A				2G									
3A1				3G1									
3A				3G									
4A1				4G1									
4A				4G									
DRYLAND 1D1				Shelterbelt/Timber									
1D				Acreson									
2D1				Waste									
2D				Other									
3D1				AG LAND TOTAL	151.000	229,850							
3D				Roads	6.000								
4D1				Farm Sites									
4D				Home Sites									
				Recreation									
Dwellings				Other									
Outbuildings				Non-AG TOTAL	6.000								

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

Total Recapture Value:

Assessor Comments and Reason for Adjustment:

DEED OF DISTRIBUTION BY PR; BETWEEN FAMILY

Comments from  
001115300

Comments:

(Continue on back)

NEBRASKA

Good Life, Great Service.

DEPARTMENT OF REVENUE

## Real Estate Transfer Statement

109

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. 7 Day 8 yr. 2024	Mo. 7 Day 8 yr. 2024
5 Grantor's Name, Address, and Telephone (Please Print)		6 Grantee's Name, Address, and Telephone (Please Print)	
Grantor's Name (Seller) Lila Mertens Street or Other Mailing Address 116 W 22nd Street		Grantee's Name (Buyer) Betty Jo Hohen, et al Street or Other Mailing Address 116 W 22nd Street	
City Grand Island	State NE	Zip Code 68801	City Grand Island
Phone Number		Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation?	State NE
Email Address		Yes No	Zip Code 68801

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

(A) Status	(B) Property Type	(C)
<input type="checkbox"/> Improved <input checked="" type="checkbox"/> Unimproved <input type="checkbox"/> IOL	<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

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

9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller?	10 Type of Transfer	11 Foreclosure	12 Irrevocable Trust	13 Revocable Trust	14 Transfer on Death	15 Trustee to Beneficiary
<input type="checkbox"/> Buyer <input type="checkbox"/> Seller	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange	<input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition	<input type="checkbox"/> Life Estate <input type="checkbox"/> Sale	<input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain)	

11 Was ownership transferred in full? (if No, explain the division.)	12 Was real estate purchased for same use? (if No, state the intended use.)
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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 <input type="checkbox"/> Niece or Nephew <input type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Spouse <input type="checkbox"/> Step-parent and Step-child	<input type="checkbox"/> Family Corp., Partnership, or LLC <input type="checkbox"/> Self <input type="checkbox"/> Other
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14 What is the current market value of the real property?	15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
\$285,676	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

16 Does this conveyance divide a current parcel of land?	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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

18 Address of Property

18a <input checked="" type="checkbox"/> No address assigned	18b <input type="checkbox"/> Vacant land	19 Name and Address of Person to Whom the Tax Statement Should be Sent
		Betty Jo Hohen 116 W 22nd Street Grand Island, NE 68801

20 Legal Description (Attach additional pages, if needed.)

The Southeast Quarter (SE1/4) of Section Thirty-Six (36), Township Two (2) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska

21 If agricultural, list total number of acres transferred in this transaction 157

22 Total purchase price, including any liabilities assumed	23 Was non-real property included in the purchase?	24 Adjusted purchase price paid for real estate (line 22 minus line 23)
	<input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.) (see instructions)	22 \$ 285,676.00 23 \$ 24 \$ 285,676.00

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.

John W. Hodge

Print or type Name of Grantor or Authorized Representative

sign

here

Signature of Grantor or Authorized Representative

Title

Attorney for Grantee

Phone Number

Date

## Register of Deed's Use Only

26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Date	For Dept. Use Only
Mo. 1 Day 12 yr. 24	\$ Exempt # 15	BK 2024 Pg. 1270	

Nebraska Department of Revenue  
Form No. 95-265-2008 10-2020 Rev. Supersedes 95-265-2008 Rev. 5-2019

Authorized by Neb. Rev. Stat. §§ 76-214, 77-1327(2)

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

Notary Public  
My commission expires 5-12-25

# Residential & Commercial Sales Worksheet

City No.	Book	Page	Sale Date	School District Code									
91	2024	1269	7/1/2024	Base: 91-0002					Affiliated:			Unified:	
Location ID	Sale Number	Usability & Code #		Parcel Number									
000143700	108	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4491		00	0	10030		004	0000		
Land	Improvements	Total		Date of Sale Property Classification Code									
1, 095	48,410	49,505		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) 1				
				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: 1 0 1				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: 20				(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 checked="" 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

000143700

Comments:

(Continue on back)



3/130

NEBRASKA  
Good Life. Great Service.  
DEPARTMENT OF REVENUE

## Real Estate Transfer Statement

108

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 <b>Webster</b>	2 County Number <b>91</b>	3 Date of Sale/Transfer Mo. <u>07</u> Day <u>01</u> Yr. <u>2024</u>	4 Date of Deed Mo. <u>07</u> Day <u>01</u> Yr. <u>2024</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) <b>Katlynn Schriener</b> Street or Other Mailing Address <b>142 N. Cherry Street</b> City <b>Red Cloud, NE</b> State <b>NE</b> Zip Code <b>68970</b> Phone Number <b>402-746-4584</b>		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) <b>Gottsch Feeding Corporation, a Nebraska Corporation</b> Street or Other Mailing Address <b>PO Box 1128</b> City <b>Hastings</b> State <b>NE</b> Zip Code <b>68902-1128</b> Phone Number <b>(402) 463-6215</b> 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 <b>sschutte@charter-title.net</b>		Email Address <b>sschutte@charter-title.net</b>	
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	
<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 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"/> Mobile Home	
8 Type of Deed <input type="checkbox"/> Bill of Sale <input type="checkbox"/> Cemetery <input type="checkbox"/> Conservator <input type="checkbox"/> Corrective <input type="checkbox"/> Death Certificate - Transfer on Death <input 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 checked="" type="checkbox"/> Quit Claim <input type="checkbox"/> Sheriff <input type="checkbox"/> Trust/Trustee <input type="checkbox"/> Warranty <input type="checkbox"/> Other _____			
9 Was transfer part of IRS like-kind exchange? (I.R.C. § 1031) <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Foreclosure <input type="checkbox"/> Gift <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition <input type="checkbox"/> Irrevocable Trust <input checked="" type="checkbox"/> Revocable Trust <input type="checkbox"/> Life Estate <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____			
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 type="checkbox"/> Yes <input checked="" 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"/> Self <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Spouse <input type="checkbox"/> Parents and Child <input type="checkbox"/> Step-parent and Step-child <input type="checkbox"/> Other _____			
14 What is the current market value of the real property? <b>\$54,000.00</b>		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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Charter Title</b> <input type="checkbox"/> No	
18 Address of Property <b>53 North Seward St. Red Cloud, NE 68970</b>		19 Name and Address of Person to Whom Tax Statement Should be Sent <b>Gottsch Feeding Corporation, a Nebraska Corporation 53 North Seward St. Red Cloud, NE 68970 PO Box 1128 Hastings, NE 68902-1128</b>	
18a <input type="checkbox"/> No address assigned		18b <input type="checkbox"/> Vacant Land	

20 Legal Description  
**Lots 8 and 9, Block 4, Garber'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 \$ <b>54,000.00</b>
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 \$ _____	23 \$ _____
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24 \$ <b>54,000.00</b>	24 \$ _____
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.

► Gottsch Feeding Corporation, a Nebraska Corporation  
Print or Type Name of Grantee or Authorized Representative

(402) 463-6215  
Phone Number

sign  
here

► Signature of Grantee or Authorized Representative  
**Veronica Reikem**

Grantee or Authorized Representative  
Title \_\_\_\_\_

July 1 2024  
Date

Register of Deeds' Use Only

For Dept. Use Only

26 Date Deed Recorded  
Mo. 7 Day 10 Yr. 24

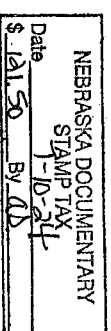
27 Value of Stamp or Exempt Number  
\$ 121.50

28 Recording Data  
**BK202416 1269**

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 July A.D., 20 24 at 3:35  
o'clock PM, Recorded in Book 2024  
on Page 1269

Robert H. Hargis County Clerk  
D. B. Deputy Deputy  
Ind    Comp    Assessor    Carded   



**AFTER RECORDING RETURN TO:**

Charter Title & Escrow Services, Inc.  
747 North Burlington Avenue  
Suite G208  
Hastings, NE 68901  
402-463-6788

**WARRANTY DEED**

Katlynn Schriener, a single person, GRANTOR, in consideration of Two Dollars (\$2.00) and other good and valuable consideration received from GRANTEE convey to GRANTEE

Gottsch Feeding Corporation, a Nebraska Corporation,

the following described real estate (as defined in Neb. Stat. 76-201) in Webster County, Nebraska:

**Lots 8 and 9, Block 4, Garber's Addition to Red Cloud, Webster County, Nebraska.**

GRANTOR covenants with GRANTEE that GRANTOR:

- (1) is lawfully seized of such real estate, that it is free from encumbrances, except easements, restrictions and reservations of records, and subject to all regular taxes and special assessments;
- (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.

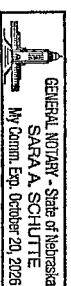
Executed this   1   day of July, 2024.

  
Katlynn Schriener

STATE OF Nebraska  
COUNTY OF Adams

The foregoing instrument was acknowledged before me this 1st day of July, 2024 by Katlynn Schriener, a single person.

  
Notary Public Sara H. Schutte



# Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code									
91	2024	1262	7/5/2024	Base: 91-0002					Affiliated:			Unified:	
Location ID	Sale Number	Useability & Code #		Parcel Number									
000102200	107	4	05	GeoCde	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
				4371			00	0	10005		003	0000	
Date of Sale Assessed Value				Date of Sale Property Classification Code									
Land	Improvements	Total		Status	Property Type	Zoning	Location	City Size	Parcel Size				
905	76,505	77,410		A) 1	B) 01	C) 1	D) 1	E) 6	F) 1				
Assessor Location: RED CLOUD (RC)													
				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: 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: 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"/> Worn Out					
(307) <input type="checkbox"/> 1 1/2 Story				(30) <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					
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High					
(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; TRANSFER TO FAMILY LLC

**Comments from**

000102200

**Comments:**

(Continue on back)



NEBRASKA

## Real Estate Transfer Statement

107

Good Life, Great Service.

• To be filled with the Register of Deeds. • Read instructions on reverse side.

FORM  
521

DEPARTMENT OF REVENUE

• If additional space is needed, add an attachment and identify the applicable item number.

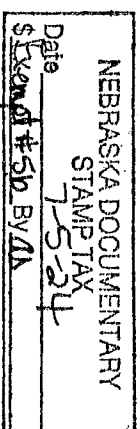
The deed will not be recorded unless this statement is signed and items 1-25 are accurately completed.

1 County Name		2 County Number		3 Date of Sale/Transfer Mo. <u>7</u> Day <u>5</u> Yr. <u>24</u>		4 Date of Deed Mo. <u>6</u> Day <u>21</u> Yr. <u>24</u>	
5 Grantor's Name, Address, and Telephone (Please Print) <b>WEBSTER - 91</b>				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) Lynsey M. Moreton aka Lynsey M. Martinez				Grantee's Name (Buyer) TOP Tier Properties, LLC			
Street or Other Mailing Address 435 Coco Palms Avenue				Street or Other Mailing Address 242 West 3rd Avenue			
City Las Vegas		State NE		Zip Code 89123		City Red Cloud	
Phone Number (702) 577-5998				State NE		Zip Code 68970	
Email Address N/A				Phone Number (402) 746-0328			
				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"/>	
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"/> 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"/> 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 transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition				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"/> Trustee to Beneficiary			
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 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"/> Parents and Child <input type="checkbox"/> Step-parent and Step-child							
14 What is the current market value of the real property? \$71,705				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 518 North Webster Street, Red Cloud, NE 68970				19 Name and Address of Person to Whom the Tax Statement Should be Sent Grantee			
18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land							
20 Legal Description (Attach additional pages, if needed.) Lots Six (6) and Seven (7), Block Three (3), Original Town of Red Cloud, Webster County, Nebraska							
21 If agricultural, list total number of acres transferred in this transaction _____.							
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 type="checkbox"/> No (If Yes, enter dollar amount and attach itemized list.) (see instructions)						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 <u>5b</u> 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. <u>LISA M. MARTINEZ-WHITE</u> Prioror Type Name of Grantee or Authorized Representative <u>Lisa M. Martinez-White</u> Signature of Grantee or Authorized Representative <u>here</u> Title Phone Number <u>7-5-24</u> Date							
Register of Deed's Use Only							
26 Date Deed Recorded Mo. <u>1</u> Day <u>5</u> Yr. <u>24</u>		27 Value of Stamp or Exempt Number \$ <u>Exempt # 5b</u>		28 Recording Data <u>BK202419 1262</u>		For Dept. Use Only	

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 July A.D., 2024, at 2:31  
o'clock PM. Recorded in Book 2024  
on Page 1262

Cheryl Haug County Clerk  
D. No. 10 Deputy  
Ind. Comp Assessor Carded



Return to:  
Theobald Law Office  
P O Box 423  
Red Cloud, NE 68970

## WARRANTY DEED

Lynsey M. Moreton, formerly known as Lynsey M. Martinez, a married person and resident of Nevada, Grantor, in consideration of ONE DOLLAR (\$1.00) and other valuable consideration received from Grantee, Top Tier Properties, LLC, a Nebraska limited liability company, conveys to Grantee, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

Lots Six (6) and Seven (7), Block Three (3), Original Town of Red Cloud, Webster County, Nebraska

Also known as: 518 N Webster Street, Red Cloud, Nebraska

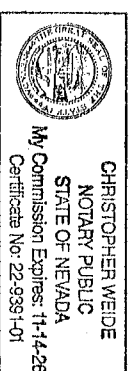
Grantor covenants, jointly and severally, with Grantee that Grantor:

- (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 06/21, 2024.

Lynsey M. Moreton  
Lynsey M. Moreton

STATE OF NEVADA )  
COUNTY OF Clark ) ss.



The foregoing instrument was acknowledged before me on 06/21, 2024 by  
Lynsey M. Moreton, formerly known as Lynsey M. Martinez, a married person and resident of  
Nevada.

Christopher Weide  
Notary Public

# Residential & Commercial Sales Worksheet

City No.	Book	Page	Sale Date	School District Code									
91	2024	1256	7/5/2024	Base: 91-0002				Affiliated:		Unified:			
Location ID	Sale Number	Useability & Code #	Parcel Number										
000163400	106	1	GeoCode	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel		
			4371			00	0	10090		000	0000		
Date of Sale Assessed Value			Date of Sale Property Classification Code										
Land	Improvements	Total											
3, 455	39, 035	42, 490	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 : 1879					Construction Date :					
Floor:			Floor Sq. Ft. : 912					Floor Sq. Ft. :					
Building Cost New:			Cost : 112, 615					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: 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:

JTWD

Comments from

000163400

Comments:

(Continue on back)



NEBRASKA

Good Life, Great Service.  
DEPARTMENT OF REVENUE

## Real Estate Transfer Statement

104

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 Mo. 07 Day 05 Yr. 2024		4 Date of Deed Mo. 07 Day 05 Yr. 2024	
5 Grantor's Name, Address, and Telephone (Please Print)							
Grantor's Name (Seller) Luke P and Brenna H Sheltrown							
Street or Other Mailing Address 1070 Rd 2100							
City Guide Rock		State NE		Zip Code 68942		City Red Cloud	
Phone Number (402) 257-7362				Phone Number (308) 389-1672		Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation?	
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"/> 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				<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 transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition <input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Revocable Trust <input type="checkbox"/> Transfer on Death <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition <input type="checkbox"/> Life Estate <input checked="" type="checkbox"/> Sale <input type="checkbox"/> Trustee to Beneficiary <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <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.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____ <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____ <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 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"/> Step-parent and Step-child							
14 What is the current market value of the real property? \$25,475							
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 105 N Walnut St Red Cloud, NE 68970							
19 Name and Address of Person to Whom the Tax Statement Should be Sent Same as Grantee							
18a <input type="checkbox"/> No address assigned    18b <input type="checkbox"/> Vacant land							
20 Legal Description (Attach additional pages, if needed.) See attached							
21 If agricultural, list total number of acres transferred in this transaction _____.							
22 Total purchase price, including any liabilities assumed ..... \$ 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.) (see instructions) ..... \$ 0.00							
24 Adjusted purchase price paid for real estate (line 22 minus line 23) ..... \$ 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.

Kory McCracken

Print or Type Name of Grantee or Authorized Representative

Signature of Grantee or Authorized Representative

sign  
here

Signature of Grantee or Authorized Representative

Title

Attorney

Date

(402) 746-3613

Phone Number  
07/05/2024

## Register of Deed's Use Only

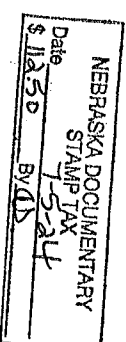
For Dept Use Only

26 Date Deed Recorded Mo. 7 Day 5 Yr. 24	27 Value of Stamp or Exempt Number \$ 112.50	28 Recording Data BK00419 1256
---	---	-----------------------------------

The East 158 feet of Annex Lot Twenty-nine (29) to the City of Red Cloud, Webster County,  
Nebraska.



State of Nebraska } ss. Entered on the  
 County of Webster } numerical index and filed for record in the  
 Clerk's office of said county this 5 day  
 of July, A.D., 2024, at 11:05  
 o'clock AM. Recorded in Book 2024  
 on Page 1256  
Cheryl Tang County Clerk  
D.oo Deputy  
 Ind.      Comp.      Assessor      Carded     



### JOINT TENANCY WARRANTY DEED

Luke Sheltown and Brenna Sheltown, husband and wife, GRANTOR, in consideration of ONE AND NO/100 DOLLARS (\$1.00) receipt of which is hereby acknowledged, convey to Kenneth Cramer and Candiece Cramer, husband and wife, as joint tenants, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

The East 158 feet of Annex Lot Twenty-nine (29) to the City of Red Cloud, Webster County, Nebraska.

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 July 5, 2024.

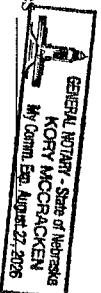
*Luke Sheltown*  
 Luke Sheltown

*Brenna Sheltown*  
 Brenna Sheltown

STATE OF NEBRASKA, COUNTY OF WEBSTER ) ss.

The foregoing instrument was acknowledged before me on July 5, 2024, by Luke Sheltown and Brenna Sheltown, husband and wife.

Comm. expires



*Kory McCracken*  
 Notary Public

# Residential & Commercial Sales Worksheet

Cntry No.	Book	Page	Sale Date	School District Code									
91	2024	1251	6/27/2024	Base: 91-0074					Affiliated:			Unified:	
Location ID	Sale Number	Usability & Code #		Parcel Number									
000330600	105	1		GeoCode	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	
				4133			00	0	20045		000	0000	
Date of Sale Assessed Value				Date of Sale Property Classification Code									
Land	Improvements	Total											
5,760	64,490	70,250		Status	Property Type	Zoning	Location	City Size	Parcel Size				
				A) 1	B) 01	C) 1	D) 1	E) 6	F) 2				
Assessor Location: BLUE HILL (BH)													
Residential				Commercial									
Multiple Improvements:				Multiple Improvements:									
Construction Date: 1900				Construction Date:									
Floor: 1,680				Floor Sq. Ft.:									
Building Cost New: 158,955				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:

SPECIAL WD

Comments from

000330600

Comments:

(Continue on back)

NEBRASKA

Record Title, Grant, Reservation,  
Declaration or Release

# 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(s).

FORM  
521

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 91	3 Date of Sale/Transfer Mo. 06 Day 27 Yr. 2024	4 Date of Deed Mo. 06 Day 18 Yr. 2024
--------------------------	-----------------------	---	--

5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller): J.S. Bank National Association, not in its individual capacity, but solely as Owner Trustee for RCF 2 Acquisition Trust, ISAOA Street or Other Mailing Address 9890-Richmond-St-100- City Houston, Texas 75019-77042 Phone Number NA Email Address sschutte@charter-title.net	6 Grantee's Name (Buyer) KenWorks Properties, LLC, a Nebraska limited liability company Street or Other Mailing Address 7140 W Monument Rd City Ayr State NE Zip Code 68925 Phone Number 402-984-1113 Email Address sschutte@charter-title.net	Is the grantee a 501(c)(3) organization? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If Yes, is the grantee a 508(a) foundation? Yes <input checked="" 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.	(B) Property Type	(C)
---	-------------------	-----

(A) Status <input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOL	<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"/> Exempt	<input type="checkbox"/> State Assessed <input type="checkbox"/> Mobile Home
---	---	---	--	---

8 Type of Deed <input type="checkbox"/> Bill of Sale <input type="checkbox"/> Cemetery	<input type="checkbox"/> Conservator <input type="checkbox"/> Corrective <input type="checkbox"/> Death Certificate - Transfer on Death	<input 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 checked="" type="checkbox"/> Warranty	<input type="checkbox"/> Other _____
--	---	---	---	---	--	--------------------------------------

9 Was transfer part of IRS like-kind exchange? (I.R.C. § 1031) <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No	10 Type of Transfer <input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange	<input type="checkbox"/> Distribution <input type="checkbox"/> Easement <input type="checkbox"/> Gift <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition	<input type="checkbox"/> Foreclosure <input type="checkbox"/> Life Estate <input type="checkbox"/> Partition	<input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Revocable Trust <input checked="" type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____	<input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary <input type="checkbox"/> Other (Explain) _____
---	---	---	--	---	---

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Aunt or Uncle or Niece or Nephew <input type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Parents and Child	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other _____
---	--	--

14 What is the current market value of the real property? \$32,000.00	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 checked="" type="checkbox"/> Yes BHS Da-Ly Sheila Hulme <input type="checkbox"/> No
---	--

18 Address of Property 210 West Saline St. Blue Hill, NE 68930	19 Name and Address of Person to Whom Tax Statement Should be Sent KenWorks Properties, LLC, a Nebraska limited liability company 7140 W Monument Rd Ayr, NE 68925
--	---

18a <input type="checkbox"/> No address assigned	18b <input type="checkbox"/> Vacant Land
--	--

20 Legal Description  
Lots 3, 4 and 5, Block A, Nelson's Subdivision 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 _____	22 \$ 32,000.00
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 \$ 32,000.00

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 Signature of Grantor or Authorized Representative <i>KenWorks Properties, LLC, a Nebraska limited liability company</i>	Grantor or Authorized Representative Title _____	402-984-1113 Phone Number June 26, 2024 Date
	KenWorks Properties, LLC, a Nebraska limited liability company Print or Type Name of Grantor or Authorized Representative	

26 Date Deed Recorded Mo. 1 Day 3 Yr. 24	27 Value of Stamp or Exempt Number \$ 72.00	28 Recording Date BK 2024, Pg 1251	For Dept. Use Only
---	--	---------------------------------------	--------------------

Index \_\_\_\_\_  
Computer \_\_\_\_\_  
Assessor \_\_\_\_\_  
Carded \_\_\_\_\_

NEBRASKA DOCUMENTARY  
STAMP TAX  
Date: 07/03/24  
\$ 72.00 By AS

**Bk 2024, Pg 1251**

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 03 day  
of July A.D., 2024, at 01:22  
o'clock PM. Recorded in Book 2024  
on Pages 1251-1253

*Anthony Davis*

County Clerk

Fee: \$22.00 By: AS Deputy  
Electronically Recorded

Commitment Number: 240094239  
Seller's Loan Number: 2005013354

After recording return to:

KENWORKS PROPERTIES LLC  
7140 W MONUMENT RD  
AYR, NE 68925

Parcel ID No.: 0000330600

### SPECIAL WARRANTY DEED

THIS DEED made and entered into on this 18 day of June, 2024, by and between U.S. BANK TRUST NATIONAL ASSOCIATION, NOT IN ITS INDIVIDUAL CAPACITY BUT SOLELY AS OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST, whose mailing address is 3501 Olympus Blvd, Suite 500, Dallas, TX 75019, hereinafter referred to as Grantor(s) and KENWORKS PROPERTIES LLC, whose tax mailing address is 7140 W MONUMENT RD, AYR, NE 68925, hereinafter referred to as Grantee(s).

WITNESSETH: That the said Grantor, for and in consideration of the sum of Thirty Two Thousand Dollars and Zero Cents (\$32,000.00), cash in hand paid, the receipt of which is hereby acknowledged, have this day given, granted, bargained, sold, conveyed and confirmed and do by these presents give, grant, bargain, sell, convey and confirm unto the said Grantee the following described real estate located in Webster County, State of Nebraska:

**LOTS THREE, FOUR AND FIVE (3, 4, 5), BLOCK "A" NELSON'S SUBDIVISION OF ROHRER'S ADDITION TO VILLAGE OF BLUE HILL, WEBSTER COUNTY, NEBRASKA.**

BEING THE SAME PROPERTY TRANSFERRED FROM DAVID B. GARWOOD, MASTER COMMISSIONER TO U.S. BANK TRUST NATIONAL ASSOCIATION, NOT IN ITS INDIVIDUAL CAPACITY BUT SOLELY AS OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST BY MASTER COMMISSIONER'S DEED RECORDED ON 03/20/2024 AT BOOK 2024 ON PAGES 417-418.

Property commonly known as: 210 WEST SALINE STREET, Blue Hill, NE 68930

This conveyance is subject to easements, covenants, conditions, restrictions, reservations, and limitations of record, if any.

*Charter Time 2476251*

TO HAVE AND TO HOLD the lot or parcel above described together with all and singular the rights, privileges, tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining unto the said Grantee(s) and unto the heirs, administrators, successors or assigns of the Grantee(s) forever in fee simple.

And the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; that the Grantor hereby specially warrants that title to the land is free from all encumbrances made by Grantor, and will defend the same against the lawful claims of all persons claiming by, through or under Grantor, but against none other.

Executed this 18 day of June, 2024.

U.S. BANK TRUST NATIONAL ASSOCIATION, NOT IN ITS INDIVIDUAL CAPACITY BUT  
SOLELY AS OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST, By Selene Finance LP, as  
Attorney-in-Fact

By: [Signature]

Name: Rory Hyde

Title: VP

STATE OF UTAH  
COUNTY OF SALT LAKE

The foregoing instrument was acknowledged before me this 18 day of JUNE, 2024 by  
Rory Hyde as U.S. of Selene Finance LP, as Attorney-in-Fact for  
U.S. BANK TRUST NATIONAL ASSOCIATION, NOT IN ITS INDIVIDUAL CAPACITY BUT  
SOLELY AS OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST on behalf of U.S. BANK  
TRUST NATIONAL ASSOCIATION, NOT IN ITS INDIVIDUAL CAPACITY BUT SOLELY AS  
OWNER TRUSTEE FOR RCF 2 ACQUISITION TRUST.

[Signature]  
Notary Public

Print Name: NATHAN K. NICHOLLS

My Commission Expires: AUG 18, 2027



# Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code									
91	2024	1248	7/2/2024	Base: 65-0011					Affiliated:			Unified:	
<b>Location ID</b>	<b>Sale Number</b>	<b>Usability &amp; Code #</b>		<b>Parcel Number</b>									
000613100	104	1		GeoCde	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	
				4487			00	0	40010		015	0000	
Date of Sale Assessed Value				Date of Sale Property Classification Code									
Land	Improvements	Total		Status	Property Type	Zoning	Location	City Size	Parcel Size				
1,930		1,930		A) 2	B) 01	C) 1	D) 1	E) 7	F) 2				
Assessor Location: GUTDE ROCK (GR)													
<b>Residential</b>				<b>Commercial</b>									
Multiple Improvements:				Multiple Improvements:									
Construction Date:				Construction Date:									
Floor:				Floor Sq. Ft.:									
Building Cost New:				Cost:									
<b>Single Family Style:</b>				<b>Residential Condition:</b>				<b>Commercial Occupancy Code:</b>					
(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				<b>Commercial Construction Class:</b>					
(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					
<b>Townhouse or Duplex Style:</b>				<b>Residential Quality:</b>				<b>Cost Rank:</b>					
(301) <input type="checkbox"/> One Story				(10) <input type="checkbox"/> Low				(6) <input type="checkbox"/> Pole Frame					
(302) <input type="checkbox"/> Two Story				(20) <input type="checkbox"/> Fair				(10) <input type="checkbox"/> Low					
(307) <input type="checkbox"/> 1 1/2 Story				(30) <input type="checkbox"/> Average				(20) <input type="checkbox"/> Average					
(308) <input type="checkbox"/> Split Level				(40) <input type="checkbox"/> Good				(30) <input type="checkbox"/> Above Average					
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High					
(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  
000613100

Comments:

(Continue on back)



11330

NEBRASKA

## Real Estate Transfer Statement

104

FORM  
521

Good Life, Great Service.

DEPARTMENT OF REVENUE

- 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 Mo. <u>1</u> Day <u>2</u> Yr. <u>24</u>	4 Date of Deed Mo. <u>7</u> Day <u>2</u> Yr. <u>24</u>
5 Grantor's Name, Address, and Telephone (Please Print) WEBSTER - 91		6 Grantee's Name (Buyer) Tavis Scott Rippen	
Grantor's Name (Seller) Edith J Watson, Successor Trustee, Ted E Delka Rvc Trst Street or Other Mailing Address 1711 Hwy 136		Grantee's Name (Buyer) Tavis Scott Rippen Street or Other Mailing Address 235 Webster Street	
City Red Cloud	State NE	City Guide Rock	State NE
Phone Number (402) 746-4680	Zip Code 68970	City Guide Rock	State NE
Email Address drillerwatson@outlook.com		Phone Number	Zip Code 68942
7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.		Is the grantee a 501(c)(3) organization? If Yes, is the grantee a 509(a) foundation?	
(A) Status		(B) Property Type	
<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 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"/> Corrective <input type="checkbox"/> Cemetery <input type="checkbox"/> Death Certificate - Transfer on Death <input type="checkbox"/> Distribution <input type="checkbox"/> Essement <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 transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller?		<input type="checkbox"/> Auction <input type="checkbox"/> Easement <input type="checkbox"/> Gift <input type="checkbox"/> Foreclosure <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Life Estate <input type="checkbox"/> Partition <input type="checkbox"/> Revocable Trust <input checked="" type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary <input type="checkbox"/> Other (Explain)	
11 Was ownership transferred in full? (If No, explain the division.)		12 Was real estate purchased for same use? (If No, state the intended use.)	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Aunt or Uncle to Niece or Nephew <input type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Ex-spouse <input type="checkbox"/> Parents and Child <input type="checkbox"/> Step-parent and Step-child <input type="checkbox"/> Other			
14 What is the current market value of the real property? \$2,235		15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No \$ _____ %	
16 Does this conveyance divide a current parcel of land?		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		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
18 Address of Property 100 Block of Nebraska Street, Guide Rock, NE		19 Name and Address of Person to Whom the Tax Statement Should be Sent Same as Grantee	
18a <input type="checkbox"/> No address assigned		18b <input type="checkbox"/> Vacant land	
20 Legal Description (Attach additional pages, if needed.) LOTS 5 & 6 BLK 15 GUIDE ROCK VANCES ADDITION			
21 If agricultural, list total number of acres transferred in this transaction _____.			
22 Total purchase price, including any liabilities assumed		22 \$ 2,000.00	
23 Was non-real property included in the purchase?		23 \$	
<input type="checkbox"/> Yes <input type="checkbox"/> No (if Yes, enter dollar amount and attach itemized list.) (see instructions)		24 \$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)		24 \$ 2,000.00	
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.

Tavis Rippen

Print or Type Name of Grantee or Authorized Representative

sign

Signature of Grantee or Authorized Representative

Title

here

## Register of Deed's Use Only

26 Date Deed Recorded

Mo. 7 Day 2 Yr. 24

27 Value of Stamp or Exempt Number

\$ 4.50

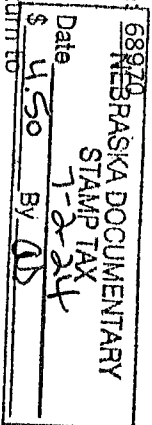
28 Recording Date

BK2024, 1248

For Dept. Use Only



Prepared By:

Name: Edith J Watson, Successor Trustee, Ted E Delka Rev TrustAddress: 1711 Hwy 136, Red CloudState: NE Zip Code: 68942

After Recording Return to

Name: Tavis Scott RippenAddress: 235 Webster Street, Guide RockState: NE Zip Code: 68942

Space Above This Line for Recorder's Use

**QUIT CLAIM DEED**STATE OF: NEBRASKAWEBSTER COUNTY

KNOW ALL MEN BY THESE PRESENTS, That for and in consideration of the sum of

Two Thousand Dollars (\$2,000) in hand paid to WATSON, EDITH J-SUCCESSOR TRUSTEE DELKA, TED E-REV TRUST, residing at 1711 Hwy 136, County of Webster, City of Red Cloud, State of Nebraska.

(hereinafter known as the "Grantor") hereby remise, release and forever quitclaim to

Tavis Scott Rippen a single individual, residing at 235 Webster Street, County of Webster, City of Guide Rock, State of Nebraska.

(hereinafter known as the "Grantee") all the rights, title, interest, and claim in or to the

Following described real estate, situated in Webster County, State of Nebraska.

Legal Description

LOTS 5 & 6 BLK 15 GUIDE ROCK VANCES ADDITION 100  
BLK NEBRASKA STREET GUIDE ROCK NE

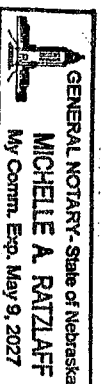
Grantor

Grantee

Edith J. Watson  
Successor Trustee

Tavis Rippen

Michelle A. Ratzlaff  
NOTARY



# Residential & Commercial Sales Worksheet

Cntry No.	Book	Page	Sale Date	School District Code									
91	2024	1242	6/24/2024	Base: 91-0074					Affiliated:			Unified:	
Location ID	Sale Number	Useability & Code #		Parcel Number									
000311100	103	4 05		GeoCde	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4133									
Land	Improvements	Total		Date of Sale Property Classification Code									
3,265	214,330	217,595		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 :									
Construction Date:				Construction Date :									
Floor:				Floor Sq. Ft. :									
Building Cost New:				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:

QCD; TRANSFER PROPERTY TO REVOCABLE TRUST

Comments from  
000311100

Comments:

(Continue on back)

NEBRASKA

Good Life. Great Service.

DEPARTMENT OF REVENUE

## Real Estate Transfer Statement

103

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 Mo. <u>6</u> Day <u>24</u> Yr. <u>24</u>	4 Date of Deed Mo. <u>6</u> Day <u>24</u> Yr. <u>24</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Richard Lee Schmidt and Sandra Ann Schmidt Street or Other Mailing Address 305 W. Otoe St. City Blue Hill State NE Zip Code 68930 Phone Number (402) 984-1911 Email Address n/a		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) See attached Street or Other Mailing Address 305 W. Otoe St. City Blue Hill State NE Zip Code 68930 Phone Number (402) 984-1911 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"/>	

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 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 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"/> Warranty	<input type="checkbox"/> Sheriff <input type="checkbox"/> Other _____ <input type="checkbox"/> Trust/Trustee
9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller?	<input type="checkbox"/> Buyer <input type="checkbox"/> Seller	<input checked="" type="checkbox"/> No <input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Foreclosure <input type="checkbox"/> Gift <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Life Estate <input type="checkbox"/> Partition <input type="checkbox"/> Revocable Trust <input checked="" type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____	<input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary
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 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? \$213,630	15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<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 305 W. Otoe St. Blue Hill, NE 68930	19 Name and Address of Person to Whom the Tax Statement Should be Sent Richard and Sandra Schmidt 305 W. Otoe St. Blue Hill, NE 68930	20 Legal Description (Attach additional pages, if needed.) West Twenty Five (25) feet Lot 3 & All Lot 4 & East Six (6') feet of North ½ Lot 5 Block 1 Rohrsers Addition to City of Blue Hill, Webster County, Nebraska.	
18a <input type="checkbox"/> No address assigned	18b <input type="checkbox"/> Vacant land		

21 If agricultural, list total number of acres transferred in this transaction \_\_\_\_\_.

22 Total purchase price, including any liabilities assumed. . . . . \$ 0.00

23 Was non-real property included in the purchase?

☐ Yes ☒ No (If Yes, enter dollar amount and attach itemized list.) (see instructions) . . . . . \$ 23

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 19.

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.

Daniel D. McMahon

Print or Type Name of Grantee or Authorized Representative

sign here Signature of Grantee or Authorized Representative

Title

Attorney for Grantee

Date

(402) 834-2022

Phone Number 6/25/24

26 Date Deed Recorded Mo. <u>7</u> Day <u>1</u> Yr. <u>24</u>	27 Value of Stamp or Exempt Number \$ Exempt #19	28 Recording Date BR2024, 19 1242	For Dept. Use Only
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**Line 6 – Grantee's Name**

Richard L. Schmidt and Sandra A. Schmidt, Co-Trustees of the Richard L. Schmidt and Sandra A. Schmidt Revocable Trust



# Certificate of Exemption – Deeds to Trustees

• Documentary Stamp Tax – Neb. Rev. Stat. § 76-902

## SECTION 1

Grantor of Instrument and Trust

Richard Lee Schmidt and Sandra Ann Schmidt

Grantee of Instrument (Trustee)

Richard L. Schmidt & Sandra A. Schmidt, Co-Trustees, Richard L. Schmidt & Sandra A. Schmidt Revocable Trust

NAME OF BENEFICIARIES	RELATIONSHIP TO GRANTOR
Richard L. Schmidt	Self/Spouse
Sandra A. Schmidt	Self/Spouse
SECTION 2	

Does a trust document exist which sets forth the grantor, the trustee, the beneficiaries, and a description of the real property transfer? ..... ☐ YES ☐ NO

**Check the exemption that would apply if the transfer was made directly from the grantor to the beneficiaries of the trust.**

- ☐ Deeds to property transferred by or to the U.S., the State of Nebraska, or any of their agencies or subdivisions.
- ☐ Deeds which, without additional consideration, confirm, correct, modify, or supplement a deed previously recorded, but which do not extend or limit existing title or interest.
- ☒ Deeds without actual consideration between: husband and wife; ex-spouses (conveying property acquired or held during the marriage); or parent and child.
- ☐ Deeds to or from a family corporation, partnership, or limited liability company (LLC). All the shares of stock of the corporation or interest in the partnership or LLC are owned by members of a family, or a trust created for the benefit of a member of that family, related to one another within the fourth degree of kindred according to the rules of civil law, and their spouses. No consideration is given other than the issuance of stock of the corporation or interest in the partnership or LLC to the family members or the return of the stock to the corporation in partial or complete liquidation of the corporation or deeds in dissolution of the interest in the partnership or LLCs. To qualify for the exemption for family corporations, partnerships, or LLC, the property must be transferred in the name of the corporation or partnership and not in the name of the individual shareholders, partners, or members.
- ☐ Deeds of partition.
- ☐ Deeds made pursuant to mergers, consolidation, sales, or transfers of the assets of a corporation pursuant to the plans of merger or consolidation filed with the Secretary of State. A copy of this plan must be presented to the register of deeds before the documentary stamp tax exemption is granted.
- ☐ Deeds made by a subsidiary corporation to its parent corporation for no consideration other than the cancellation or surrender of the subsidiary's stock.
- ☐ Cemetery deeds.
- ☐ Mineral deeds.
- ☐ Deeds executed pursuant to court decrees.
- ☐ Deeds which release a reversionary interest, a condition subsequent or precedent, a restriction, or any other contingent interest.
- ☐ Deeds of distribution executed by a personal representative conveying to devisees or heirs property passing by testate or intestate succession.
- ☐ Deeds transferring property located within the boundaries of an Indian Reservation where the grantor or grantee is a Native American residing on an Indian Reservation in Nebraska.
- ☐ Deeds which convey property held in the name of any partnership or LLC, which is not a family partnership or LLC, to any partner in the partnership or member of the LLC, or to his or her spouse.
- ☐ Easements.

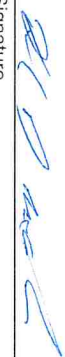
## Certificate of Exemption – Deeds to Trustees

Page 2

### SECTION 3

I hereby certify that I am familiar with all of the relevant details of the real estate transaction described above, and if the transaction were made directly from the grantor of the trust to the beneficiaries of the trust, it would be exempt from documentary stamp tax as indicated above.

I further certify that documentation of the trust that supports this exemption is available for inspection at any time by the Nebraska Department of Revenue.

sign  here

Signature

Attorney for Trustees

Title

6/25/24

Date

File this Certificate of Exemption with the Real Estate Transfer Statement, Form 521,  
when exemption #19 is claimed in Item 25 on the Form 521.

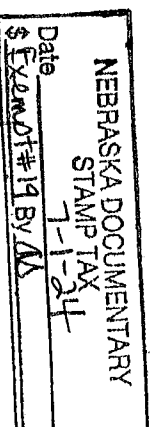
[www.revenue.ne.gov/PAD](http://www.revenue.ne.gov/PAD) or 402-471-5984

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 1 day  
of July A.D., 20 24, at 2:23  
o'clock P.M. Recorded in Book 2024  
on Page 1242  
Deborah Hing County Clerk  
ID Deputy  
Ind    Comp    Assessor    Carded   

BOOK 2024 PAGE 1242



Return Address: McM Law Office, L.L.C., 2727 W. 2<sup>nd</sup> St., Suite 225, Hastings, NE 68901

### QUITCLAIM DEED

RICHARD LEE SCHMIDT and SANDRA ANN SCHMIDT, husband and wife,  
GRANTOR (whether one or more), in consideration of Love and Affection and Funding their  
Trust, quitclaims to GRANTEE (whether one or more), RICHARD L. SCHMIDT AND/OR  
SANDRA A. SCHMIDT, CO-TRUSTEES OF THE RICHARD L. SCHMIDT AND SANDRA  
A. SCHMIDT REVOCABLE TRUST, all of GRANTOR'S interest in the following described  
real estate (as defined in Neb. Rev. Stat. Sec. 76-201):

West Twenty Five (25) feet Lot 3 & All Lot 4 & East Six (6') feet of North ½ Lot 5 Block 1  
Rohrs Addition to City of Blue Hill, Webster County, Nebraska.

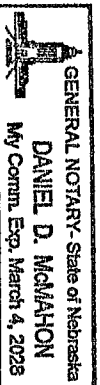
EXECUTED: June 24, 2024.


  
RICHARD L. SCHMIDT

  
SANDRA A. SCHMIDT

STATE OF NEBRASKA       )  
  ) ss:  
COUNTY OF ADAMS       )

The foregoing instrument was acknowledged before me on the 24th day of June, 2024, by  
RICHARD L. SCHMIDT and SANDRA A. SCHMIDT, husband and wife, GRANTOR.



  
Notary Public



# Agricultural Land Sales Worksheet

City No.	Book	Page	Sale Date	School District Code									
91	2024	1221	6/7/2024	Base: 91-0074					Affiliated:		Unified:		
Location ID	Sale Number	Useability & Code #		Parcel Number									
001612000	102	4	05	GeoCde	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4243	3	10	30	1	00000	1	000	0000	
Land	Improvements	Total		Date of Sale Property Classification Code									
458, 425		458, 425		Status	Property Type	Zoning	Location	City Size	Parcel Size				
	Irrigation Type:			A) 2	B) 05	C) 5	D) 3	E) 0	F) 9				
ICG		ACRES:		VALUE:		ICG		ACRES:		VALUE:			
IRRIGATED	1A1			GRASSLAND		1G1	11.730			18,185			
	1A					1G	25.820			44,075			
	2A1					2G1	44.570			64,630			
	2A					2G	6.530			11,785			
	3A1					3G1							
	3A					3G	27.050			48,825			
	4A1					4G1	7.260			11,965			
	4A					4G	15.690			27,535			
DRYLAND	1D1					Shelterbelt/Timber							
	1D	59.490				163,600							
	2D1					Acreton							
	2D	11.120				30,585				6,185			
	3D1					Other							
	3D					AG LAND TOTAL		232.920		458,425			
	4D1	5.970				Roads		3.840					
	4D	5.320				Farm Sites							
						Home Sites							
						Recreation							
	Dwellings					Other							
	Outbuildings					Non-AG TOTAL		3.840					

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

Total Recapture Value:

Assessor Comments and Reason for Adjustment:

QCD, CORRECTS BK2024 PG342

Comments from

001612000 001612100

Comments:

(Continue on back)



65960  
65965

• 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 Mo. 6 Day 7 Yr. 2024	4 Date of Deed Mo. 6 Day 7 Yr. 2024
5 Grantor's Name, Address, and Telephone (Please Print) Lora F. Ballard Street or Other Mailing Address 4375 South 149th Avenue Circle City Omaha State NE Zip Code 68137 Phone Number Email Address		6 Grantee's Name, Address, and Telephone (Please Print) Lora F. Ballard, Diane M. Bauer, and Steven G. Dressman Street or Other Mailing Address 4375 South 149th Avenue Circle City Omaha State NE Zip Code 68137 Phone Number Is the grantee a 501(c)(3) organization? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes, is the grantee a 509(a) foundation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 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"/> Conservator <input checked="" type="checkbox"/> Corrective <input type="checkbox"/> Death Certificate – Transfer on Death <input 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"/> State Assessed <input type="checkbox"/> Exempt <input type="checkbox"/> Mobile Home
9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031) by buyer or seller?	<input type="checkbox"/> Buyer <input checked="" type="checkbox"/> Seller	10 Type of Transfer <input type="checkbox"/> Auction <input type="checkbox"/> Easement <input type="checkbox"/> Exchange <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition	<input type="checkbox"/> Distribution <input type="checkbox"/> Foreclosure <input type="checkbox"/> Gift <input type="checkbox"/> Life Estate <input type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____ <input type="checkbox"/> Irrevocable Trust <input type="checkbox"/> Revocable Trust <input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary
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 checked="" type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Parents and Child <input type="checkbox"/> Self <input type="checkbox"/> Family Corp., Partnership, or LLC <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?	\$274,000		
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	Lora F. Ballard 4375 S. 149th Ave. Cir. Omaha, NE 68137		
18a <input checked="" type="checkbox"/> No address assigned	18b <input type="checkbox"/> Vacant land		
20 Legal Description (Attach additional pages, if needed.)  See attached Exhibit "A"			

21 If agricultural, list total number of acres transferred in this transaction	236.76
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.) (see instructions)
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	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.

Rachel A. Truhlsen  
Print or Type Name of Grantee or Authorized Representative  
Signature of Grantee or Authorized Representative  
Title  
Attorney for Grantee  
Phone Number (402) 426-8877  
Date 6-26-24

26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Data	For Dept Use Only
Mo. 6 Day 24 Yr. 24	\$ Exempt #4	BR 2024 Pg 1221	

Nebraska Department of Revenue  
Form No. 56-269-2008 10-2020 Rev. Supersedes 56-269-2008 Rev. 6-2019  
Authorized by Neb. Rev. Stat. §§ 76-214, 77-1327(2)

EXHIBIT "A"

TO

CORRECTEC QUITCLAIM DEED (BALLARD)

The West Half of the Northeast Quarter of Section 30, Township 3 North, Range 10 West of the 6<sup>th</sup> P.M., Webster County, Nebraska; and

The Northwest Quarter of Section 30, Township 3 North, Range 10 West of the 6<sup>th</sup> P.M., Webster County, Nebraska, LESS a tract of land described as follows: Commencing at the Northwest corner of said NW<sup>1</sup>/<sub>4</sub>, thence N89°54'34"E, along the North line of said NW<sup>1</sup>/<sub>4</sub>, 810.00 feet; thence S44°57'17"W, 1146.42 feet to the West line of said NW<sup>1</sup>/<sub>4</sub>; thence N00°00'00"E, along the West line of said NW<sup>1</sup>/<sub>4</sub>, 810.00 fee to the Point of Beginning (said tract containing 7.53 acres, more or less, of which 1.18 acres, more or less, is County Road Right-of-Way).

Date: 06/26/24  
\$ Ex004 By KO

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 26 day  
of June A.D., 2024, at 02:01  
o'clock P.M. Recorded in Book 2024  
on Page 1221

*Matthew J. Blair* County Clerk  
Fee: \$10.00 By: KO Deputy  
Electronically Recorded

Please return deed to:  
Rachel A. Truhlsen, Attorney  
PO Box 70  
Blair, NE 68008

### CORRECTED QUITCLAIM DEED

This is a Corrected Quitclaim Deed intended to correct the legal description in a certain Quitclaim Deed dated October 6, 2023, and recorded at Book 2024, Page 342 on February 26, 2024, in the records of the Webster County Clerk, Red Cloud, Nebraska:

Lora F. Ballard, a single person, Grantor, in consideration of One Dollar (\$1.00) and other valuable consideration, quitclaims to Lora F. Ballard, Diane M. Bauer, and Steven G. Dressman, Grantee, as tenants in common, the following described real estate (as defined in Neb. Rev. Stat. §76-201):

The West Half of the Northeast Quarter of Section 30, Township 3 North, Range 10 West of the 6<sup>th</sup> P.M., Webster County, Nebraska; and

The Northwest Quarter of Section 30, Township 3 North, Range 10 West of the 6<sup>th</sup> P.M., Webster County, Nebraska, LESS a tract of land described as follows: Commencing at the Northwest corner of said NW<sup>1</sup>/<sub>4</sub>, thence N89°54'34"E, along the North line of said NW<sup>1</sup>/<sub>4</sub>, 810.00 feet; thence S44°57'17"W, 1146.42 feet to the West line of said NW<sup>1</sup>/<sub>4</sub>; thence N00°00'00"E, along the West line of said NW<sup>1</sup>/<sub>4</sub>, 810.00 feet to the Point of Beginning (said tract containing 7.53 acres, more or less, of which 1.18 acres, more or less, is County Road Right-of-Way),

subject to easements and restrictions of record.

DATED this 7<sup>th</sup> day of June, 2024.

*Lora F. Ballard*  
Lora F. Ballard

STATE OF NEBRASKA )  
COUNTY OF Douglas ) ss.

The foregoing instrument was acknowledged before me on the 7<sup>th</sup> day of June, 2024, by Lora F. Ballard, a single person.



*Walter A. Garcia Gonzalez*  
Notary Public

# Residential & Commercial Sales Worksheet

Cntry No.	Book	Page	Sale Date	School District Code									
91	2024	1219	6/24/2024	Base: 65-0011					Affiliated:			Unified:	
<b>Location ID</b>	<b>Sale Number</b>	<b>Useability &amp; Code #</b>		<b>Parcel Number</b>									
000601000	101	4	05	GeoCde	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
				4487			00	0	40005		004	0000	
<b>Date of Sale Assessed Value</b>													
<b>Land</b>	<b>Improvements</b>	<b>Total</b>		<b>Date of Sale Property Classification Code</b>									
601,965		601,965		Status	Property Type	Zoning	Location	City Size	Parcel Size				
<b>Assessor Location: GUIDE ROCK (GR)</b>				A) 2	B) 01	C) 1	D) 1	E) 7	F) 2				
<b>Residential</b>				<b>Commercial</b>									
<b>Multiple Improvements:</b>				<b>Multiple Improvements:</b>									
<b>Construction Date:</b>				<b>Construction Date:</b>									
<b>Floor:</b> Floor Sq. Ft.:				<b>Floor Sq. Ft.:</b>									
<b>Building Cost New:</b> Cost:				<b>Cost:</b>									
<b>Single Family Style:</b>				<b>Residential Condition:</b>				<b>Commercial Occupancy Code:</b>					
(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				<b>Commercial Construction Class:</b>					
(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					
<b>Townhouse or Duplex Style:</b>				<b>Residential Quality:</b>				<b>Cost Rank:</b>					
(301) <input type="checkbox"/> One Story				(10) <input type="checkbox"/> Low				<b>Condition:</b>					
(302) <input type="checkbox"/> Two Story				(20) <input type="checkbox"/> Fair				(10) <input type="checkbox"/> Worn Out					
(307) <input type="checkbox"/> 1 1/2 Story				(30) <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					
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High					
(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; COURT DECREE WITH EX-SPOUSE

**Comments from**

**Comments:**

000601000 000601100 000603100 000603200 001006000

(Continue on back)

Good Life, Great Service.  
DEPARTMENT OF REVENUE• 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. 06 Day 24 Yr. 2024	Mo. 06 Day 18 Yr. 2024
5 Grantor's Name, Address, and Telephone (Please Print)		6 Grantee's Name, Address, and Telephone (Please Print)	
Grantor's Name (Seller) Amanda M. Wulf Street or Other Mailing Address 1454 North Kansas City Superior State NE Zip Code 68978 Phone Number (402) 746-0708 Email Address wulfpac@outlook.com		Grantee's Name (Buyer) Dusty R. Wulf Street or Other Mailing Address 2631 Highway 136 City Guide Rock NE Zip Code 68942 Phone Number (402) 984-2552 Email Address drwulf48@gmail.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	
<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"/> Mobile Home <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"/> Mineral Interests-Nonproducing <input type="checkbox"/> State Assessed <input type="checkbox"/> Mobile Home <input type="checkbox"/> Mineral Interests-Producing <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"/> Corrective <input type="checkbox"/> Easement <input type="checkbox"/> Lease <input type="checkbox"/> Personal Rep. <input type="checkbox"/> Trust/Trustee <input type="checkbox"/> Warranty <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 transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input checked="" 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.) <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"/> 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"/> Step-parent and Step-child <input checked="" type="checkbox"/> Ex-spouse <input type="checkbox"/> Parents and Child			
14 What is the current market value of the real property? \$601,965			
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 1) 2701 S. 12th St., Omaha, NE 68106 2) 330 Boydston Street, Guide Rock, NE 68942 3) 215 Crest Street, Guide Rock, NE 68942 4) 1454 North Kansas, Guide Rock, NE 68942 5) 1454 North Kansas, Guide Rock, NE 68942			
19 Name and Address of Person to Whom the Tax Statement Should be Sent Dusty R. Wulf 2631 Highway 136 Guide Rock, NE 68942			
20 Legal Description (Attach additional pages, if needed.) 18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land See attached			
21 If agricultural, list total number of acres transferred in this transaction 176.84			
22 Total purchase price, including any liabilities assumed ..... \$ 0.00			
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.) (see instructions) ..... \$ 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 12 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. Joseph H. Murray Print or Type Name of Escalator or Authorized Representative Signature of Grantee or Authorized Representative Title Attorney Date (402) 768-7400 Phone Number 06/26/2024			
26 Date Deed Recorded 27 Value of Stamp or Exempt Number 28 Recording Data			
Mo. 10 Day 26 Yr. 24 \$ Exempt # 12 Rl 2024 Pg 1219			
Register of Deed's Use Only For Dept Use Only			

16390  
The Northeast Quarter (NE 1/4) and Lot One (1) in the Southeast Quarter (SE 1/4) of Section Twelve (12), Township One (1) North, Range Nine (9) West of the Sixth P.M. in Webster County, Nebraska;

16390  
The South Half (S 1/2) of Lot Fifteen (15) and all of Lots Sixteen and Seventeen (16 & 17) and the North Half (N 1/2) of Lot Eighteen (18), Block Six (6), Original Town of Guide Rock, Webster County, Nebraska;

16390  
Lot Fourteen (14) and the North Half (N 1/2) of Lot Fifteen (15), Block Six (6), Original Town of Guide Rock, Webster County, Nebraska;

16390  
Lots Four and Five (4 & 5), Block Four (4), Original Town of Guide Rock, Webster County, Nebraska; and

16390  
Lots One, Two and Three (1, 2 & 3), Block Four (4), Original Town of Guide Rock, Webster County, Nebraska.

Index \_\_\_\_\_  
Computer \_\_\_\_\_  
Assessor \_\_\_\_\_  
Carded \_\_\_\_\_

NEBRASKA DOCUMENTARY  
STAMP TAX

Date: 06/26/24

\$ Ex012 By KO

**Bk 2024, Pg 1219**

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 26 day  
of June A.D., 2024, at 08:38  
o'clock AM. Recorded in Book 2024  
on Pages 1219-1220

*Anthony Davis*

County Clerk

Fee: \$16.00 By: KO Deputy  
Electronically Recorded

RETURN TO: JOSEPH H. MURRAY, PC LLO

ATTORNEY AT LAW

P.O. BOX 87

HEBRON, NEBRASKA 68370

**QUITCLAIM DEED**

Amanda M. Wulf, spouse of Grantee, GRANTOR, whether one or more, in consideration of One Dollar (\$1.00) and dissolution of marriage, receipt of which is hereby acknowledged, quitclaims and conveys to Dusty R. Wulf, spouse of Grantor, GRANTEE, all of GRANTOR'S interest in the following described real estate (as defined in Nebraska Revised Statutes §76-201):

/The Northeast Quarter (NE 1/4) and Lot One (1) in the Southeast Quarter (SE 1/4) of Section Twelve (12), Township One (1) North, Range Nine (9) West of the Sixth P.M. in Webster County, Nebraska;

✓The South Half (S ½) of Lot Fifteen (15) and all of Lots Sixteen and Seventeen (16 & 17) and the North Half (N ½) of Lot Eighteen (18), Block Six (6), Original Town of Guide Rock, Webster County, Nebraska;

✓Lot Fourteen (14) and the North Half (N ½) of Lot Fifteen (15), Block Six (6), Original Town of Guide Rock, Webster County, Nebraska;

Lots Four and Five (4 & 5), Block Four (4), Original Town of Guide Rock, Webster County, Nebraska; and

Lots One, Two and Three (1, 2 & 3), Block Four (4), Original Town of Guide Rock, Webster County, Nebraska.

Executed this 16<sup>th</sup> day of June, 2024.


*Amanda M Wulf*  
Amanda M. Wulf

STATE OF NEBRASKA                    )  
  ) ss.  
COUNTY OF Wickolls            )

The foregoing instrument was acknowledged before me on the 18<sup>th</sup> day of June,  
2024 by Amanda M. Wulf, spouse of Grantee.



(SEAL)

  
\_\_\_\_\_  
Notary Public



# Agricultural Land Sales Worksheet

Curly No.	Book	Page	Sale Date		School District Code									
91	2024	1215	6/21/2024		Base: 65 - 0005		Affiliated:		Unified:					
Location ID	Sale Number	Usability & Code #		Parcel Number										
001310500	100	4	05	GeoCde	Twn	Rng	Secd	Qtr	Subdiv	Area	Blk	Parcel		
Date of Sale Assessed Value				4135	4	9	22	3	00000	1	000	0000		
Land	Improvements	Total		Date of Sale Property Classification Code										
247,540	2,080	249,620		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		56.740		87,950						
1A				1G		31.430		48,715						
2A1				2G1		66.920		97,035						
2A				2G										
3A1				3G1										
3A				3G										
4A1				4G1										
4A				4G										
DRYLAND 1D1				Shelterbelt/Timber										
1D				Accretion										
2D1				Waste										
2D				Other										
3D1				AG LAND TOTAL		155.090		233,700						
3D				Roads		1.970								
4D1				Farm Sites		1.000		13,840						
4D				Home Sites										
				Recreation										
Dwellings				Other										
Outbuildings				Non-AG TOTAL		2.970		13,840						

(Continue on back)

63215

NEBRASKA

Good Life, Great Service  
DEPARTMENT OF REVENUE

# Real Estate Transfer Statement

100

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. 06 Day 21 Yr. 2024	Mo. 06 Day 04 Yr. 2024

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) See attached.

Street or Other Mailing Address	Street or Other Mailing Address
---------------------------------	---------------------------------

City	State	Zip Code	City	State	Zip Code
------	-------	----------	------	-------	----------

Phone Number NA	Phone Number NA	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 NA	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	(B) Property Type	(C)
<input checked="" type="checkbox"/> Improved <input type="checkbox"/> Unimproved <input type="checkbox"/> IOL	<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"/> Mobile Home

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

9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller?	10 Type of Transfer	Distribution Auction Buyer	Foreclosure Easement Exchange	Irrevocable Trust Life Estate Partition	Revocable Trust Sale Satisfaction of Contract	Transfer on Death Trustee to Beneficiary Other (Explain)
--	---------------------	----------------------------------	-------------------------------------	---	---	--

11 Was ownership transferred in full? (If No, explain the division.)	12 Was real estate purchased for same use? (If No, state the intended use.)
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

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

14 What is the current market value of the real property?	15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
\$314,291	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> \$ _____ %

16 Does this conveyance divide a current parcel of land?	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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

18 Address of Property 2232 Highway 4 Blue Hill, NE 68930	19 Name and Address of Person to Whom the Tax Statement Should be Sent Same as grantee.
---	--

20 Legal Description (Attach additional pages, if needed.)  
The Southwest Quarter (SW 1/4) of Section Twenty-Two (22), Township Four (4) North, Range Nine (9) West of the 6th P.M., Webster County, Nebraska.

21 If agricultural, list total number of acres transferred in this transaction 158.06

22 Total purchase price, including any liabilities assumed	22 \$	1,00
23 Was non-real property included in the purchase?	23 \$	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If Yes, enter dollar amount and attach itemized list.) (see instructions)	24 \$	1,00

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

25 If this transfer is exempt from the documentary stamp tax, list the exemption number 76-902(20)

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.

Matthew D. Baack

Print or Type Name of Grantee or Authorized Representative

Signature of Grantee or Authorized Representative

Title

Attorney at Law

Phone Number (402) 834-3300

Date 6/25/24

26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Date	For Dept Use Only
Mo. 10 Day 25 Yr. 24	\$ Exempt #20	BL 2004 Pg 1205	

**Item 5: Grantor's Name, Address, & Telephone**

Name: Diane Pavelka, Trustee of the Edward J. Pavelka and Diane Pavelka Living Trust

Mailing: 111 Hwy 74

City, State, Zip: Glenvil, NE 68941

Name: Diane Pavelka, Trustee, Diane Pavelka Exempt Marital Trust, created under the Edward J. Pavelka and Diane Pavelka Living Trust, dated June 16, 2014

Mailing: 111 Hwy 74

City, State, Zip: Glenvil, NE 68941

Index \_\_\_\_\_  
Computer \_\_\_\_\_  
Assessor \_\_\_\_\_  
Carded \_\_\_\_\_

NEBRASKA DOCUMENTARY  
STAMP TAX  
Date: 06/25/24  
\$ Ex020 By KO

**Bk 2024, Pg 1215**

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 25 day  
of June A.D., 2024, at 03:05  
o'clock PM. Recorded in Book 2024  
on Pages 1215-1216

*Anthony Davis*

County Clerk

Fee: \$16.00 By: KO Deputy  
Electronically Recorded

Return to: Skalka, Baack & Fiala Law Firm, PO Box 907, Hastings, NE 68902-0907

## TRUSTEE'S DEED

Diane Pavelka, Trustee of the Edward J. Pavelka and Diane Pavelka Living Trust, *Grantor*, in consideration of Distribution of Trust Assets, conveys to Diane Pavelka, Trustee, Diane Pavelka Exempt Marital Trust, created under the Edward J. Pavelka and Diane Pavelka Living Trust, dated June 16, 2014, *Grantee*, the following described real property in Webster County, Nebraska (as defined in NEB. REV. STAT. 76-201):

The Southwest Quarter (SW $\frac{1}{4}$ ) of Section Twenty-Two (22), Township Four (4)  
North, Range Nine (9) West of the 6<sup>th</sup> P.M., Webster County, Nebraska;

subject to easements, reservations, covenants and restrictions of record. Grantor covenants with  
Grantee that Grantor has legal power and lawful authority to convey the same.

Executed: June 4, 2024.

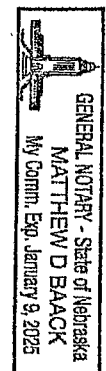
*Diane Pavelka*

Diane Pavelka, Trustee, Edward J. Pavelka  
and Diane Pavelka Living Trust

State of Nebraska )  
 ) ss.  
County of Adams )

The foregoing instrument was acknowledged before me on June 4, 2024, by Diane Pavelka, Trustee of the Edward J. Pavelka and Diane Pavelka Living Trust.

*Matthew D. Back*  
Notary Public



Matthew D Back  
Printed Name

# Residential & Commercial Sales Worksheet

City No.	Book	Page	Sale Date	School District Code									
91	2024	1189	6/24/2024	Base: 91-0002			Affiliated:			Unified:			
Location ID	Sale Number	Useability & Code #		Parcel Number									
000162600	99	1		GeoCode	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4371			00	0	10090		000	0000	
Land	Improvements	Total		Date of Sale Property Classification Code									
7,405	74,580	81,985		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) 5				
				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: 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: 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:

JTWD

Comments from

000162600

Comments:

(Continue on back)



NEBRASKA

## Real Estate Transfer Statement

99

FORM  
521

Good Life, Great Service.

DEPARTMENT OF REVENUE

- 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. 06 Day 24 Yr. 24	4 Date of Deed Mo. 06 Day 21 Yr. 24
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Spare Time Property Management, L.L.C. Street or Other Mailing Address 1112 Road K City Red Cloud State NE Zip Code 68970 Phone Number Email Address		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Roger L Kinkade & Paula M. Kinkade Street or Other Mailing Address 1045 N Webster St City Red Cloud State NE Zip Code 68970 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"/>	
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"/> 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"/> IOL <input type="checkbox"/> Commercial <input type="checkbox"/> Recreational		(B) Property Type <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"/> Sheriff <input type="checkbox"/> Other _____ <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 transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Grantor Trust <input type="checkbox"/> Partition <input type="checkbox"/> Life Estate <input checked="" type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____			
11 Was ownership transferred in full? (If No, explain the division.) <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 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"/> Step-parent and Step-child			
14 What is the current market value of the real property? \$45,000		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 checked="" type="checkbox"/> Yes <input 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 118 S Webster St Red Cloud, NE 68970 18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land		19 Name and Address of Person to Whom the Tax Statement Should be Sent Same as Grantee	
20 Legal Description (Attach additional pages, if needed.) See attached.			

21 If agricultural, list total number of acres transferred in this transaction \_\_\_\_\_.

22 Total purchase price, including any liabilities assumed ..... 22 \$ 45,000.00

23 Was non-real property included in the purchase?  
☐ Yes ☒ No (If Yes, enter dollar amount and attach itemized list.) (see instructions) ..... 23 \$ 24 \$ 45,000.00

24 Adjusted purchase price paid for real estate (line 22 minus line 23) ..... 24 \$ 45,000.00

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.

Kory McCracken

(402) 746-3613

sign

Print or Type Name of Grantee or Authorized Representative

Attorney

Phone Number  
06/24/24

here

Signature of Grantee or Authorized Representative

Title

Date

## Register of Deed's Use Only

26 Date Deed Recorded

27 Value of Stamp or Exempt Number

28 Recording Data

For Dept. Use Only

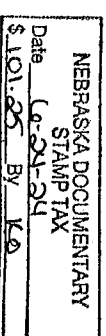
Mo. 6 Day 24 Yr. 24

\$ 101.25

BX 2024 Pg 1189

A tract of land located in Annex Lot 17, described as follows: Beginning at the quarter stone on the West side of Annex Lot 17, adjoining Highway 281; Thence South on the West line of Annex Lot 17, as originally platted, to a point that is due East of the Southeast corner of Lot One (1), Block One (1), Kaley and Jackson's Addition to the City of Red Cloud and the TRUE POINT OF BEGINNING; continuing thence South on the West line of Annex Lot 17, as originally platted, to a point 724.4 feet South of the Northwest corner of Annex Lot 17; thence East 271.4 feet; thence South 10 feet; thence East 41 feet, plus or minus, to a point due South of the fence that marks the East line of the tract; thence North 260 feet, plus or minus, to a point that is due East of the Southeast corner of Lot One (1), Block One (1), Kaley and Jackson's Addition to the City of Red Cloud; thence West 312.4 feet, plus or minus, to a point on the West line of Annex Lot 17, as originally platted, and the TRUE POINT OF BEGINNING; EXCEPT a tract conveyed to the State of Nebraska for highway purposes in Book 29, page 234.

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 21 day  
 of June A.D., 2024, at 11:52  
 o'clock A. M. Recorded in Book 2024  
 on Page 1189-1190  
Abby Horig County Clerk  
Ka.00 Deputy  
 Ind. Comp Assessor Carded



## JOINT TENANCY WARRANTY DEED


Spare Time Property Management, L.L.C., a Nebraska limited liability company, GRANTOR, in consideration of ONE AND NO/100 DOLLARS (\$1.00) receipt of which is hereby acknowledged, conveys to Roger L. Kinkade & Paula M. Kinkade, husband and wife, and Leland Kinkade, a married person, as joint tenants, GRANTEES, the following described real estate (as defined in Neb. Rev. Stat. 76-201):

A tract of land located in Annex Lot 17, described as follows: Beginning at the quarter stone on the West side of Annex Lot 17, adjoining Highway 281; Thence South on the West line of Annex Lot 17, as originally platted, to a point that is due East of the Southeast corner of Lot One (1), Block One (1), Kaley and Jackson's Addition to the City of Red Cloud and the TRUE POINT OF BEGINNING; continuing thence South on the West line of Annex Lot 17, as originally platted, to a point 724.4 feet South of the Northwest corner of Annex Lot 17; thence East 271.4 feet; thence South 10 feet; thence East 41 feet, plus or minus, to a point due South of the fence that marks the East line of the tract; thence North 260 feet, plus or minus, to a point that is due East of the Southeast corner of Lot One (1), Block One (1), Kaley and Jackson's Addition to the City of Red Cloud; thence West 312.4 feet, plus or minus, to a point on the West line of Annex Lot 17, as originally platted, and the TRUE POINT OF BEGINNING; EXCEPT a tract conveyed to the State of Nebraska for highway purposes in Book 29, page 234.

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.

Spare Time Property Management, L.L.C.

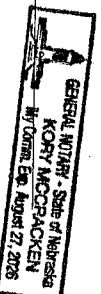
  
 Lonnie Schriener, Member

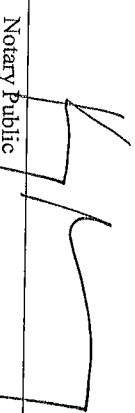
  
 Jonathan Schriener, Member

STATE OF NEBRASKA, COUNTY OF WEBSTER ) ss.

The foregoing instrument was acknowledged before me on June 21, 2024, by Lonnie Schriener, Member, and Jonathan Schriener, Member, on behalf of Spare Time Property Management, L.L.C.

Comm. expires



  
 Notary Public

BOOK 2004 PAGE 119D

## STATEMENT OF AUTHORITY

Pursuant to the Nebraska

Uniform Limited Liability Company Act § 21-127.

1. This Statement of Authority is for the limited liability company:

Spare Time Property Management, L.L.C.,

and the street and mailing address of its designated office is:

1112 Road K, Red Cloud, NE 68970.

2. The officers or members **authorized** and **required** to execute instruments conveying, encumbering, or otherwise affecting title to real property on behalf of the Company, without limitation, are:

Lonnie Schriner and Jonathan Schriner.

3. The undersigned understand and acknowledge that this Statement of Authority will be filed in the office of the Nebraska Secretary of State.

Executed June 12, 2024.

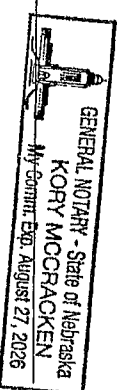
  
Lonnie Schriner, Member

  
Jonathan Schriner, Member

STATE OF NEBRASKA, COUNTY OF WEBSTER ) ss.

The foregoing instrument was acknowledged before me on June 12, 2024, by Lonnie Schriner, Member, and Jonathan Schriner, Member, on behalf of Spare Time Property Management, L.L.C.

Comm. expires



  
Notary Public

# Sales Worksheet

[illegible]



NEBRASKA

## Real Estate Transfer Statement

98

FORM  
521Good Life, Great Service.  
DEPARTMENT OF REVENUE

- 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 Mo. <u>6</u> Day <u>18</u> Yr. <u>2024</u>	4 Date of Deed Mo. <u>6</u> Day <u>17</u> Yr. <u>2024</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Nellie M. Dilley Street or Other Mailing Address 401 S Hastings City Hastings State NE Zip Code 68901 Phone Number (402) 984-1768		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Allan Pettit and Nicole Pettit Street or Other Mailing Address 210 N Seward St City Red Cloud State NE Zip Code 68970 Phone Number (402) 401-0249 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 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"/> Cemetery <input type="checkbox"/> Death Certificate	<input type="checkbox"/> Conservator <input type="checkbox"/> Corrective <input type="checkbox"/> Death Certificate - Transfer on Death <input 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 checked="" type="checkbox"/> Warranty	<input type="checkbox"/> Other <input type="checkbox"/> Sheriff <input type="checkbox"/> Trust/Trustee
9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No	10 Type of Transfer <input type="checkbox"/> Distribution <input type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input type="checkbox"/> Exchange <input type="checkbox"/> Foreclosure <input type="checkbox"/> Gift <input type="checkbox"/> Life Estate <input type="checkbox"/> Partition <input type="checkbox"/> Revocable Trust <input type="checkbox"/> Irrevocable Trust <input checked="" type="checkbox"/> Sale <input type="checkbox"/> Satisfaction of Contract <input type="checkbox"/> Other (Explain) _____	<input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Aunt or Uncle <input type="checkbox"/> Family Corp., Partnership, or LLC <input type="checkbox"/> Self <input type="checkbox"/> Brothers and Sisters <input type="checkbox"/> Grandparents and Grandchild <input type="checkbox"/> Parents and Child <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? \$5,000	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 checked="" type="checkbox"/> Yes <u>Southern Title Co.</u> <input type="checkbox"/> No	
18 Address of Property <u>205 N Seward St</u> <u>Red Cloud, NE 68970</u>	19 Name and Address of Person to Whom the Tax Statement Should be Sent Grantee	
18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land		
20 Legal Description (Attach additional pages, if needed.) Lot Twelve (12), Block Twenty-one (21), Original Town of Red Cloud, Webster County, Nebraska		

21 If agricultural, list total number of acres transferred in this transaction \_\_\_\_\_.

22 Total purchase price, including any liabilities assumed	22	\$	5,000.00
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.) (see instructions)	23	\$	
24 Adjusted purchase price paid for real estate (line 22 minus line 23)	24	\$	5,000.00

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.

Allan Pettit

Print or Type Name of Grantee or Authorized Representative

Grantee

(402) 401-0249

Phone Number

6/18/2024

Date

 here sign  
 Signature of Grantee or Authorized Representative

Title

## Register of Deed's Use Only

26 Date Deed Recorded Mo. <u>6</u> Day <u>18</u> Yr. <u>24</u>	27 Value of Stamp or Exempt Number \$ <u>11.25</u>	28 Recording Date <u>BK2004101159</u>	For Dept. Use Only
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# Sales Worksheet

City No.	Book	Page	Sale Date		School District Code									
91	2024	1104	6/14/2024		Base: 91-0002					Affiliated:			Unified:	
Location ID	Sale Number	Usability & Code #		Parcel Number										
000149000	97	4	06	GeoCde		Twn	Rng	Sec	Qtr	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4371			00	0	10045		002	0000		
Land	Improvements	Total		Date of Sale Property Classification Code										
1, 915	96,365	98,280		Status										
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:					Construction Date:					
Floor:				Floor Sq. Ft.:					Floor Sq. Ft.:					
Building Cost New:				Cost:					Cost:					
Single Family Style: 101				Residential Condition: 30					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 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:					
(302) <input type="checkbox"/> Two Story				(20) <input type="checkbox"/> Fair					(10) <input type="checkbox"/> Low					
(307) <input type="checkbox"/> 1 1/2 Story				(30) <input checked="" type="checkbox"/> Average					(20) <input type="checkbox"/> Average					
(308) <input type="checkbox"/> Split Level				(40) <input type="checkbox"/> Good					(30) <input type="checkbox"/> Above Average					
(309) <input type="checkbox"/> 2 1/2 Story				(50) <input type="checkbox"/> Very Good					(40) <input type="checkbox"/> High					
(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; SALE FROM AGENCY/POLITICAL SUBDIVISION														
Comments from				Comments:										
000149000														

(Continue on back)

38610

NEBRASKA

# Real Estate Transfer Statement

97

FORM 521

Good Life, Great Service.  
DEPARTMENT OF REVENUE

- 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 Mo. 06 Day 14 Yr. 2024	4 Date of Deed Mo. 06 Day 11 Yr. 2024
---------------	-----------------	---	--

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

Grantor's Name (Seller) Secretary of Housing & Urban Development Street or Other Mailing Address 16740 Broadway	Grantee's Name (Buyer) Brealynn D. Young & Brandon D. Young Street or Other Mailing Address 422 N. Franklin St.
--	--

City Denver	State CO	Zip Code 80202	City Red Cloud	State NE	Zip Code 68970
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Phone Number (470) 444-8050	Phone Number (402) 746-4088	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"/>
--------------------------------	--------------------------------	---	--	---

Email Address  
info@ainecompanies.com

Email Address  
brealynmhockhart@gmail.com

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

(A) Status	(B) Property Type	(C)
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8 Type of Deed	9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller?	10 Type of Transfer	11 Was ownership transferred in full? (If No, explain the division.)	12 Was real estate purchased for same use? (If No, state the intended use.)
----------------	--	---------------------	--	---

13 Was the transfer between relatives, or if to a trustee, are the trustor and beneficiary relatives? (If Yes, check the appropriate box.)	14 What is the current market value of the real property?	15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)
--	---	--

16 Does this conveyance divide a current parcel of land?	17 Was transfer through a real estate agent or a title company? (If Yes, include the name of the agent or title company contact.)	18 Address of Property	19 Name and Address of Person to Whom the Tax Statement Should Be Sent
--	---	------------------------	--

20 Legal Description (Attach additional pages, if needed.)	21 If agricultural, list total number of acres transferred in this transaction
--	--

22 Total purchase price, including any liabilities assumed.	23 Was non-real property included in the purchase?	24 Adjusted purchase price paid for real estate (line 22 minus line 23)
---	--	---

25 If this transfer is exempt from the documentary stamp tax, list the exemption number	26 Date Deed Recorded	27 Value of Stamp or Exempt Number	28 Recording Data	For Dept Use Only
---	-----------------------	------------------------------------	-------------------	-------------------

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Index \_\_\_\_\_  
Computer \_\_\_\_\_  
Assessor \_\_\_\_\_  
Carded \_\_\_\_\_

NEBRASKA DOCUMENTARY STAMP TAX	
Date: 06/14/24	
\$ Ex002	By KO

**Bk 2024, Pg 1104**

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 14 day  
of June A.D., 2024, at 02:10  
o'clock PM. Recorded in Book 2024  
on Pages 1104-1105

*Anthony J. King*

County Clerk

Fee: \$16.00 By: KO Deputy  
Electronically Recorded

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

HUD Case No: 321-388936

## Warranty Deed

For Valuable Consideration, **SECRETARY OF HOUSING & URBAN DEVELOPMENT**, a government agency under the laws of the United States of America, Grantor, hereby conveys unto **BREALYNN D. YOUNG AND BRANDON D. YOUNG, WIFE AND HUSBAND**, as joint tenants not as tenants in common, whether one or more, Grantees, the following described real estate (as described in Neb. Stat. 76-201) in:

The South Half (S½) of Lot Twenty-one (21) and all of Lots Twenty-two (22), Twenty-three (23) and Twenty-four (24), Block Two (2), Radcliff's Addition to Red Cloud, Webster County, Nebraska, according to the recorded plat thereof.

Being the same property acquired by the Grantor pursuant to the provisions of the National Housing Act, as amended (12 U.S.C. 1701 et seq.) and the Department of Housing and Urban Development Act (42 U.S.C. 3531 et seq.).

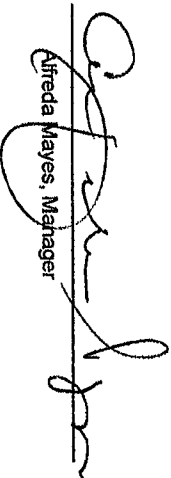
GRANTOR covenants jointly and severally, if more than one) with GRANTEE that GRANTOR:

- (1) is lawfully seized of said Premises and it is free from encumbrances, subject to reservations, covenants and easements of record;
- (2) has legal power and lawful authority to convey the same; and
- (3) warrants and will defend the title to said premises against the lawful claims of all persons claiming the same or any part thereof through, by or under Grantor

This Deed is not in effect until June 14, ~~2023~~ 2024.

IN WITNESS WHEREOF, the undersigned being specifically named under the Redellegation of Authority published at 77 Fed. Reg. 37252, Page 37258 (June 20, 2012) as an authorized agent, has set his/her hand and seal as a principal and/or officer of Raine & Company LLC for and on behalf of the Secretary of Housing and Urban Development has hereunto signed as of the 11 day of June, 2024.

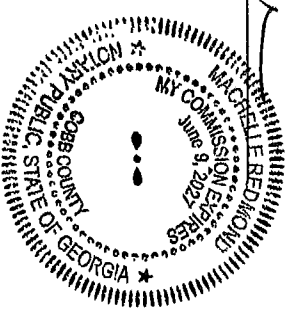
**SECRETARY OF HOUSING & URBAN  
DEVELOPMENT**

By:   
Alfreda Mayes, Manager

STATE OF Georgia  
COUNTY OF Fulton } ss

On this 11 day of June, 2024, before me personally appeared Alfreda Mayes, Manager of Secretary of Housing & Urban Development.

Notary Public -  
06/09/2027



# Agricultural Land Sales Worksheet

Cntry No.	Book	Page	Sale Date			School District Code																											
91	2024	1102	6/13/2024			Base: 91-0002					Affiliated:			Unified:																			
Location ID	Sale Number	Useability & Code #																															
002316500	96	4 05																															
Date of Sale Assessed Value				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">GeoCode</td> <td style="width: 10%;">Twn</td> <td style="width: 10%;">Rng</td> <td style="width: 10%;">Sect</td> <td style="width: 10%;">Qrt</td> <td style="width: 10%;">Subdiv</td> <td style="width: 10%;">Area</td> <td style="width: 10%;">Blk</td> <td style="width: 10%;">Parcel</td> </tr> <tr> <td>4369</td> <td>2</td> <td>12</td> <td>36</td> <td>4</td> <td>00000</td> <td>1</td> <td>000</td> <td>0000</td> </tr> </table>												GeoCode	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	4369	2	12	36	4	00000	1	000	0000
GeoCode	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel																									
4369	2	12	36	4	00000	1	000	0000																									
Land	Improvements	Total		Date of Sale Property Classification Code																													
1, 970		1, 970		Status	Property Type	Zoning	Location	City Size	Parcel Size																								
	Irrigation Type:			A) 2	B) 05	C) 5	D) 3	E) 0	F) 5																								
ICG ACRES: VALUE:				ICG ACRES: VALUE:																													
IRRIGATED	1A1			GRASSLAND				1G1																									
	1A							1G																									
	2A1							2G1	3.380		1,690																						
	2A							2G	0.560		280																						
	3A1							3G1																									
	3A							3G																									
	4A1							4G1																									
	4A							4G																									
DRYLAND	1D1			Shelterbelt/Timber																													
	1D			Accretion																													
	2D1			Waste																													
	2D			Other																													
	3D1			AG LAND TOTAL				3.940		1,970																							
	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:

Assessor Comments and Reason for Adjustment:

QCD; DISTRIBUTION BETWEEN FAMILY

Comments from  
002316500

Comments:

(Continue on back)



## Real Estate Transfer Statement

916

FORM  
521Good Life, Great Service  
DEPARTMENT OF REVENUE

• 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 Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u>		4 Date of Deed Mo. <u>12</u> Day <u>30</u> Yr. <u>23</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Select County & County Number				6 Grantee's Name, Address, and Telephone (Please Print)			
Grantor's Name (Seller) <u>Maria C. Jaeger Strom</u>				Grantee's Name (Buyer) <u>Trish L. &amp; Tyler A. Hinnrichs</u>			
Street or Other Mailing Address <u>1124 126th Rd P.O. Box 236</u>				Street or Other Mailing Address <u>3315 W. Pony Express Rd</u>			
City <u>Stromsburg</u> State <u>NE</u> Zip Code <u>68666</u>				City <u>Hy</u> State <u>NE</u> Zip Code <u>68925</u>			
Phone Number <u>402-360-0121</u>				Phone Number <u>402-469-4152</u> Is the grantee a 501(c)(3) organization? Yes, is the grantee a 509(a) foundation? <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>			
Email Address <u></u>				Email Address <u>thinnrichs08@gmail.com</u>			
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"/> 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 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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Auction <input type="checkbox"/> Easement <input type="checkbox"/> Gift <input type="checkbox"/> Life Estate <input type="checkbox"/> Sale <input type="checkbox"/> Transfer on Death <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <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.) <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 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 type="checkbox"/> Step-parent and Step-child							
14 What is the current market value of the real property? <u>1470</u>							
15 Was the mortgage assumed? (If Yes, state the amount and interest rate.) <input type="checkbox"/> Yes <input 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 type="checkbox"/> No							
18 Address of Property							
19 Name and Address of Person to Whom the Tax Statement Should be Sent							
20 Legal Description <u>A Tract S. of Hwy 10 SE 1/4 36-2-12</u>							
18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land							
21 If agricultural, list total number of acres <u>39.1</u>							
22 Total purchase price, including any liabilities assumed							
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.)							
24 Adjusted purchase price paid for real estate (line 22 minus line 23)							
25 If this transfer is exempt from the documentary stamp tax, list the exemption number <u>516</u>							
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 <u>Trish L. Hinnrichs</u> Signature of Grantee or Authorized Representative <u>Trish L. Hinnrichs</u> Title <u>owner</u> Date <u>6/13/24</u>							
Register of Deed's Use Only 26 Date Deed Recorded Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u> 27 Value of Stamp or Exempt Number \$ <u>Exempt \$50</u> 28 Recording Data <u>BK00416 1102</u> For Dept. Use Only							

## QUITCLAIM DEED

This quitclaim deed made on December 30, 2023, between Marla C Tegerstrom of

1124 126th RD, PO Box 236, Stromsburg NE 68666

(Address)

(Grantor Name)

(City, State, Zip code)

That for and in the consideration of the sum of one dollar (\$1.00), the receipt of which is hereby acknowledged, Marla C Tegerstrom does hereby release, remise and forever quitclaim back unto

(Grantor Name)

Trish L. Hinrichs and Tyler A. Hinrichs the original 1/3 of the land, if any, in that certain real property commonly known as Narrows, located in the City of Inavale, County of Webster, State of Nebraska, described as follows:

The 1/3 of the portion of owners currently named as Trish L. Hinrichs & Tyler A. Hinrichs; Connie Piper, Stanley Bean, Marla Tegerstrom, William Bean & Dixie Schriener.

Legal: A Tract S of Hwy in in SE1/4SE1/4; Property 36-2-12; Description 36-2-12  
Parcel ID: 0002316500. Tax District 45 2F2S - 91- 0002

Together with all the tenements, hereditaments, and appurtenances thereunto belonging, and the reversions, remainders, rents, issues, and profits thereof.

Dated this 17 day of January, 2024.

Marla C Tegerstrom  
Grantor's Signature

Marla C Tegerstrom  
Print Name

STATE OF Nebraska COUNTY OF Polk On 1/17/2024  
before me, Marla C Tegerstrom,

Appeared being personally known to me personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

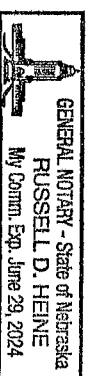
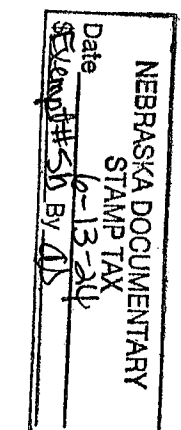
WITNESS my hand and official seal.

(Seal)

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 13 dayof June A.D., 2024 at 12:33o'clock PM. Recorded in Book 2024on Page 1102Marla C Tegerstrom County Clerkind. 10:50 Deputy

# Residential & Commercial Sales Worksheet

Cnty No.	Book	Page	Sale Date	School District Code									
91	2024	1101	6/13/2024	Base: 91-0002					Affiliated:			Unified:	
Location ID	Sale Number	Usability & Code #		Parcel Number									
002316500	95	4	05	GeoCode	Twn	Rng	Sect	Qrt	Subdiv	Area	Blk	Parcel	
Date of Sale Assessed Value				4369	2	12	36	4	00000	1	000	0000	
Land	Improvements	Total		Date of Sale Property Classification Code									
1, 970		1, 970		Status	Property Type	Zoning	Location	City Size	Parcel Size				
Assessor Location: RURAL (RUR)				A) 2	B) 05	C) 5	D) 3	E) 0	F) 5				
				Residential				Commercial					
Multiple Improvements:				Multiple Improvements:									
Construction Date:				Construction Date:									
Floor:				Floor Sq. Ft.:									
Building Cost New:				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:				Cost Rank:					
(301) <input type="checkbox"/> One Story	(10) <input type="checkbox"/> Low				Pole Frame		Condition:						
(302) <input type="checkbox"/> Two Story	(20) <input type="checkbox"/> Fair				(10) <input type="checkbox"/> Worn Out								
(307) <input type="checkbox"/> 1 1/2 Story	(30) <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								
(309) <input type="checkbox"/> 2 1/2 Story	(50) <input type="checkbox"/> Very Good				(40) <input type="checkbox"/> High								
(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; DISTRIBUTION BETWEEN FAMILY

Comments from  
002316500

Comments:

(Continue on back)



• 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 Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u>	4 Date of Deed Mo. <u>12</u> Day <u>30</u> Yr. <u>23</u>
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) <u>William Brax</u> Street or Other Mailing Address <u>630 W. Lindsay Street</u> City <u>Lindsborg</u> State <u>KS</u> Zip Code <u>67456</u> Phone Number <u>402-469-4155</u> Email Address		6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) <u>Tom &amp; Tracy A. Horricks</u> Street or Other Mailing Address <u>3315 W. Pony Express Rd</u> City <u>Atch</u> State <u>NE</u> Zip Code <u>68425</u> Phone Number <u>402-469-4155</u> Email Address	

7 Property Classification Number. Check one box in categories A and B. Check C if property is also a mobile home.		(B) Property Type		(C)
(A) Status				
<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 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"/> Corrective	<input type="checkbox"/> Distribution	<input type="checkbox"/> Land Contract/Memo	<input type="checkbox"/> Partition
<input type="checkbox"/> Cemetery	<input type="checkbox"/> Death Certificate - Transfer on Death	<input type="checkbox"/> Executor	<input type="checkbox"/> Easement	<input type="checkbox"/> Lease
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 type="checkbox"/> Auction	<input checked="" type="checkbox"/> Distribution	<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Irrevocable Trust	<input type="checkbox"/> Revocable Trust
<input type="checkbox"/> Court Decree	<input type="checkbox"/> Exchange	<input type="checkbox"/> Easement	<input type="checkbox"/> Gift	<input type="checkbox"/> Life Estate
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			
14 What is the current market value of the real property?				
<u>1970</u>				
15 Was the mortgage assumed? (If Yes, state the amount and interest rate.)				
<input type="checkbox"/> Yes <input 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		19 Name and Address of Person to Whom the Tax Statement Should be Sent		
18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land				
20 Legal Description				
<u>A tract 5.05 Hwy 15 SE 1/4 36-2-12</u>				

21 If agricultural, list total number of acres 394.

22 Total purchase price, including any liabilities assumed. .... 22 \$ \_\_\_\_\_

23 Was non-real property included in the purchase? ☐ Yes ☐ 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 \$ \_\_\_\_\_ 0100

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

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.

Fish K. Horricks  
Print, or Type Name of Grantor or Authorized Representative

402-4169-4155  
Phone Number

Tracy A. Horricks  
Signature of Grantee or Authorized Representative

owner  
Title

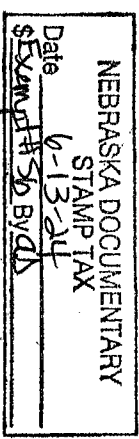
6/13/24  
Date

sign  
here

### Register of Deeds Use Only

26 Date Deed Recorded Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u>	27 Value of Stamp or Exempt Number \$ <u>Exempt #5b</u>	28 Recording Date <u>BR202419 1101</u>	For Dept. Use Only
---	--	---	--------------------

Entered on the  
numerical index and filed for record in the  
Clerk's office of said county this 13 day  
of June A.D. 2024 at 12:29  
o'clock P.M. Recorded in Book 2024  
on Page 1101  
Robert H. King County Clerk  
AD Deputy



Ind Comp Assessor Carded

## QUITCLAIM DEED

This quitclaim deed made on December 30, 2023, between William Bean, of

630 West Lindsborg Street Lindsborg, KS 67456

(Address)

(City, State, Zip code)

That for and in the consideration of the sum of one dollar (\$1.00), the receipt of which is hereby acknowledged,  
William Bean does hereby release, remise and forever quitclaim back unto  
(Grantor Name)

Trish L. Himrichs and Tyler A. Himrichs the original 1/3 of the land, if any, in that certain real property commonly known as Narrows, located in the City of Inavale, County of Webster, State of Nebraska, described as follows:

The 1/3 of the portion of owners currently named as Trish L. Himrichs & Tyler A. Himrichs; Connie Piper, Stanley Bean, Marla Teegerstrom, William Bean & Dixie Schriener.

Legal: A Tract S of Hwy in in SE1/4SE1/4; Property 36-2-12; Description 36-2-12  
Parcel ID: 0002316500. Tax District 45 2F2S - 91 - 0002

Together with all the tenements, hereditaments, and appurtenances thereunto belonging, and the reversions, remainders, rents, issues, and profits thereof.

Dated this 7th day of January, 2024.

William Bean

William Bean

Grantor's Signature

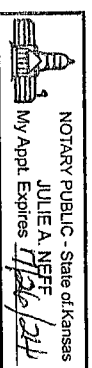
Print Name

STATE OF KS COUNTY OF McPherson On January 7th  
before me, Julie A. Neff,  
~~William Bean~~

Appeared William Bean personally known to me (or  
proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within  
instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and  
that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s)  
acted, executed the instrument.

WITNESS my hand and official seal.

(Seal)



Julie A. Neff  
Commission # 1172397

# Sales Worksheet

Entry No.	Book	Page	Sale Date		School District Code									
91	2024	1100	6/13/2024		Base: 91-0002			Affiliated:			Unified:			
Location ID	Sale Number	Useability & Code #		Parcel Number										
002316500	94	4	05	GeoCde	Twn	Rng	Sec	Qtr	Subdiv	Area	Blk	Parcel		
Date of Sale Assessed Value				4369	2	12	36	4	00000	1	000	0000		
Land	Improvements	Total		Date of Sale Property Classification Code										
1, 970		1, 970		Status	Property Type	Zoning	Location	City Size	Parcel Size					
	Irrigation Type:			A) 2	B) 05	C) 5	D) 3	E) 0	F) 5					
LCG		ACRES:		LCG		ACRES:		VALUE:						
IRRIGATED	1A1			GRASSLAND		1G1								
	1A			1G										
	2A1			2G1		3.380		1,690						
	2A			2G		0.560		280						
	3A1			3G1										
	3A			3G										
	4A1			4G1										
	4A			4G										
DRYLAND	1D1			Shelterbelv/Timber										
	1D			Accretion										
	2D1			Waste										
	2D			Other										
	3D1			AG LAND TOTAL		3.940		1,970						
	3D			Roads										
	4D1			Farm Sites										
	4D			Home Sites										
				Recreation										
	Dwellings			Other										
	Outbuildings			Non-AG TOTAL										

(Continue on back)



## Real Estate Transfer Statement

94

Good Life, Great Service  
DEPARTMENT OF REVENUEFORM  
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 Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u>		4 Date of Deed Mo. <u>12</u> Day <u>30</u> Yr. <u>23</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) <u>Shirley M. Bean</u> Street or Other Mailing Address <u>6012 SE 52nd</u> City <u>Lincoln</u> State <u>NE</u> Zip Code <u>68521</u> Phone Number <u>402-534-4617</u> Email Address				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) <u>Trish L. + Tyler A. Hinrichs</u> Street or Other Mailing Address <u>3315 W. Pony Express Rd</u> City <u>Lincoln</u> State <u>NE</u> Zip Code <u>68425</u> Phone Number <u>402-469-4155</u> Email Address <u>thinhinh548@gmail.com</u>			
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"/> 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"/> Cemetery <input type="checkbox"/> Conservator <input type="checkbox"/> Corrective <input type="checkbox"/> Death Certificate - Transfer on Death <input 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 checked="" 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 type="checkbox"/> Auction <input type="checkbox"/> Court Decree <input checked="" type="checkbox"/> Distribution <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 <input type="checkbox"/> Transfer on Death <input type="checkbox"/> Trustee to Beneficiary <input type="checkbox"/> Other (Explain) _____							
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 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? <u>1970</u>							
15 Was the mortgage assumed? (If Yes, state the amount and interest rate.) <input type="checkbox"/> Yes <input 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 type="checkbox"/> No							
18 Address of Property							
19 Name and Address of Person to Whom the Tax Statement Should be Sent							
18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land							
20 Legal Description <u>A Tract 5 of Hwy in SE 1/4 36-2-12</u>							
21 If agricultural, list total number of acres <u>394</u>							
22 Total purchase price, including any liabilities assumed							
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.)							
24 Adjusted purchase price paid for real estate (line 22 minus line 23)							
25 If this transfer is exempt from the documentary stamp tax, list the exemption number <u>5b</u>							
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 <u>Trish L. Hinrichs</u>							
Signature of Grantee or Authorized Representative <u>Trish L. Hinrichs</u>							
Title <u>owner</u>							
Date <u>6/13/24</u>							
Phone Number <u>402-469-4152</u>							
Register of Deed's Use Only							
26 Date Deed Recorded Mo. <u>6</u> Day <u>13</u> Yr. <u>24</u>		27 Value of Stamp or Exempt Number \$ <u>Exempt</u> # <u>5b</u>		28 Recording Data BK <u>2024</u> Pg <u>1100</u>		For Dept. Use Only	

## QUITCLAIM DEED

This quitclaim deed made on December 30, 2023, between Stanley M. Bean, of6042 SR521, Sunbury, Ohio 43074, (City, State, Zip code)

(Address)

(Grantor Name)

That for and in the consideration of the sum of one dollar (\$1.00), the receipt of which is hereby acknowledged, Stanley M. Bean does hereby release, remise and forever quitclaim back unto

(Grantor Name)

Trish L. Hinrichs and Tyler A. Hinrichs the original 1/3 of the land, if any, in that certain real property commonly known as Narrows, located in the City of Inavale, County of Webster, State of Nebraska, described as follows:

The 1/3 of the portion of owners currently named as Trish L. Hinrichs &amp; Tyler A. Hinrichs; Connie Piper; Stanley Bean, Marla Teegestrom, William Bean &amp; Dixie Schurmer;

Legal: A Tract S of Hwy in in SE1/4SE1/4; Property 36-2-12; Description 36-2-12  
Parcel ID: 0002316500. Tax District 45 2F2S - 91- 0002

Together with all the tenements, hereditaments, and appurtenances thereunto belonging, and the reversions, remainders, rents, issues, and profits thereof.

Dated this 11 day of January, 2024.Stanley M Bean

Grantor's Signature

Stanley M. Bean

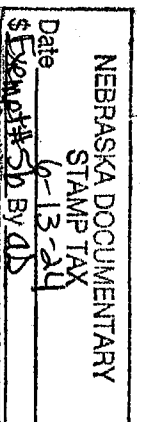
Print Name

STATE OF Ohio COUNTY OF Delaware On January 17<sup>th</sup>, 2024  
before me, Nicholas R Queen,Appeared Stanley M Bean

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

(Seal)

Notary of the State of  
County of Webster ss.Entered on the  
numerical index and filed for record in the  
Clerk's office of said county this 13 day  
of June A.D. 2024 at 12:28  
o'clock P.M. Recorded in Book 2024  
on Page 1100Stanley M Bean County Clerk  
10-20 DeputyI, Nicholas R Queen, Notary**Nicholas Ray Queen**  
Notary Public, State of Ohio  
My Commission Expires 10-02-27

# Agricultural Land Sales Worksheet

Cnty No.		Book	Page	Sale Date		School District Code									
91		2024	1099	6/13/2024		Base: 91-0002					Affiliated:		Unified:		
Location ID	Sale Number	Useability & Code #		Parcel Number											
002316500	93	4	05	GeoCde	Twn	Rng	Sect	Qtr	Subdiv	Area	Blk	Parcel			
Date of Sale Assessed Value				4369	2	12	36	4	00000	1	000	0000			
Land	Improvements	Total		Date of Sale Property Classification Code											
1, 970		1, 970		Status	Property Type	Zoning	Location	City Size	Parcel Size						
	Irrigation Type:			A) 2	B) 05	C) 5	D) 3	E) 0	F) 5						
LCG		ACRES:	VALUE:	LCG		ACRES:	VALUE:								
IRRIGATED	1A1			GRASSLAND		1G1									
	1A					1G									
	2A1					2G1	3.380	1,690							
	2A					2G	0.560	280							
	3A1					3G1									
	3A					3G									
	4A1					4G1									
	4A					4G									
DRYLAND	1D1			Shelterbelt/Timber											
	1D			Accretion											
	2D1			Waste											
	2D			Other											
	3D1			AG LAND TOTAL			3.940	1,970							
	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:
Assessor Comments and Reason for Adjustment:		
QCD; DISTRIBUTION BETWEEN FAMILY		
Comments from		Comments:
002316500		





## QUITCLAIM DEED

This quitclaim deed made on December 30, 2023, between

Constance (Connie) Pieper  
(Grantor Name)1310 5th ST, Friend, NE 68359

(Address)

(City, State, Zip code)

That for and in the consideration of the sum of one dollar (\$1.00), the receipt of which is hereby acknowledged, Connie Constance Pieper does hereby release, remise and forever quitclaim back unto

(Grantor Name)

Trish L. Hinrichs and Tyler A. Hinrichs the original 1/3 of the land, if any, in that certain real property commonly known as Narrows, located in the City of Inavale, County of Webster, State of Nebraska, described as follows:

The 1/3 of the portion of owners currently named as Trish L. Hinrichs &amp; Tyler A. Hinrichs; Connie Pieper, Stanley Bean, Maria Teegestrom, William Bean &amp; Dixie Schriener.

Legal: A Tract S of Hwy in in SE1/4SE1/4; Property 36-2-12; Description 36-2-12  
Parcel ID: 0002316500. Tax District 45 2F2S - 91- 0002

Together with all the tenements, hereditaments, and appurtenances therunto belonging, and the reversions, remainders, rents, issues, and profits thereof.

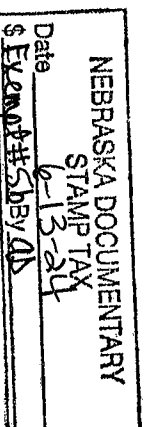
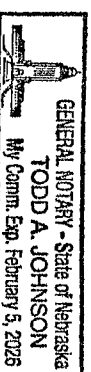
Dated this 19<sup>th</sup> day of January, 2024.Constance J. Pieper  
Grantor's SignatureConstance Pieper  
Print NameSTATE OF NE COUNTY OF Saline On January 19, 2024  
before me, Todd A. JOHNSON,Appeared Constance L. Pieper personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

(Seal)

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 13 day  
of June A.D. 2024 at 12:35o'clock PM Recorded in Book 2024  
on Page 1099Abbey Haug County Clerk  
DB DeputyFind Comp Assessor Carried

# Residential & Commercial Sales Worksheet

Cntry No.		Book	Page	Sale Date		School District Code									
91		2024	1078	6/13/2024		Base: 91-0002					Affiliated:			Unified:	
Location ID		Sale Number	Usability & Code #		Parcel Number										
000150000		92	1		GeoCode	Twn	Ring	Sect	Qrt	Subdiv	Area	Blk	Parcel		
					4371			00	0	10045		004	0000		
Date of Sale Assessed Value					Date of Sale Property Classification Code										
Land		Improvements	Total		Status	Property Type	Zoning	Location	City Size	Parcel Size					
1, 640		152, 025	153, 665		A) 1	B) 01	C) 1	D) 1	E) 6	F) 2					
Assessor Location: RED CLOUD (RC)															
					Residential				Commercial						
Multiple Improvements:					Multiple Improvements :				Multiple Improvements :						
Construction Date:					Construction Date :				Construction Date :						
					Floor Sq. Ft. :				Floor Sq. Ft. :						
					Cost :				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:															
TRUSTEE'S DEED															
Comments from      Comments:															
000150000															
(Continue on back)															



Good Life, Great Service

DEPARTMENT OF REVENUE

• 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.

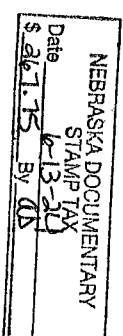
1 County Name		2 County Number		3 Date of Sale/Transfer Mo. <u>6</u> Day <u>13</u> Yr. <u>2024</u>		4 Date of Deed Mo. <u>6</u> Day <u>12</u> Yr. <u>2024</u>	
5 Grantor's Name, Address, and Telephone (Please Print) Grantor's Name (Seller) Jeffrey J. Cahill & Michelle E. Pryor, Co-Tr Cahill Family Tr Street or Other Mailing Address <u>4551 29th St</u> City <u>Lincoln</u> State <u>NE</u> Zip Code <u>68520</u> Phone Number <u>N/A</u> Email Address <u>N/A</u>				6 Grantee's Name, Address, and Telephone (Please Print) Grantee's Name (Buyer) Mackenzie J. Cole Street or Other Mailing Address <u>441 N Cherry St</u> City <u>Red Cloud</u> State <u>NE</u> Zip Code <u>68970</u> Phone Number <u>N/A</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 <u>N/A</u>			
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"/> 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		<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 type="checkbox"/> Warranty		<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 checked="" 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 type="checkbox"/> Warranty			
9 Was transfer part of IRS like-kind exchange (I.R.C. § 1031 Exchange) by buyer or seller? <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <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) _____		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"/> Trustee to Beneficiary <input type="checkbox"/> Buyer <input type="checkbox"/> Seller <input checked="" type="checkbox"/> No <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.) <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 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? \$ <u>118,500</u>		15 Was the mortgage assumed? (If Yes, state the amount and interest rate.) <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 checked="" type="checkbox"/> Yes <u>GTA Real Estate Group</u> <input type="checkbox"/> No	
18 Address of Property 441 N Cherry St Red Cloud, NE 68970 18a <input type="checkbox"/> No address assigned 18b <input type="checkbox"/> Vacant land		19 Name and Address of Person to Whom the Tax Statement Should be Sent Grantee		20 Legal Description (Attach additional pages, if needed.) Lots One (1), Two (2) and Three (3), Block Four (4), Radcliffs Addition to Red Cloud, Webster County, Nebraska			
21 If agricultural, list total number of acres transferred in this transaction _____.		22 Total purchase price, including any liabilities assumed		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.) (see instructions)		24 Adjusted purchase price paid for real estate (line 22 minus line 23)	
25 If this transfer is exempt from the documentary stamp tax, list the exemption number _____.		26 Date Deed Recorded		27 Value of Stamp or Exempt Number		28 Recording Date	
29 Signature of Grantor or Authorized Representative <u>Jeffrey J. Cahill</u> Print or Type Name of Grantor or Authorized Representative Signature of Grantee or Authorized Representative		30 Signature of Grantee or Authorized Representative <u>Mackenzie J. Cole</u> Print or Type Name of Grantee or Authorized Representative Signature of Grantee or Authorized Representative		31 Title		32 Date	
33 Register of Deed's Use Only		34 For Dept. Use Only		35		36	



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 13 day  
of June, A.D., 20 24, at 11:50  
o'clock A.M. Recorded in Book 2024  
on Page 1078

Abney Tamm County Clerk  
10:00 Deputy  
Ind      Comp      Assessor      Carded     



Return to:  
Southern Title, LLC  
2837 W Hwy 6 #205  
Hastings, NE 6801

### TRUSTEE'S DEED

Jeffrey J. Cahill and Michelle E. Pryor, Successor Co-Trustees of The Cahill Family Trust, dated October 16, 2003, GRANTORS, in consideration of One Dollar (\$1.00) and other valuable consideration received from GRANTEE, Mackenzie J. Cole, conveys to GRANTEE, the following described real estate, (as defined in Neb. Rev. Stat. 76-201):

Lots One (1), Two (2) and Three (3), Block Four(4), Radcliff's Addition to Red Cloud, Webster County, Nebraska

Subject to easements and restrictions of record

GRANTORS covenant with GRANTEE that GRANTORS:

- (1) ac lawfully seized 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 any acts of the GRANTORS.

Executed June 12, 2024.

Jeffrey J. Cahill Co-Trustee Michelle E. Pryor Co-Trustee  
Jeffrey J. Cahill, Successor Co-Trustee Michelle E. Pryor, Successor Co-Trustee



STATE OF NEBRASKA )  
COUNTY OF Webster ) ss.

The foregoing instrument was acknowledged before me on June 12, 2024,  
by Jeffrey J. Cahill and Michelle E. Pryor, Successor Co-Trustees of The Cahill Family Trust,  
dated October 16, 2003.

Bridget Daehling  
Notary Public

My Commission Expires: May 19, 2025