PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 04/01/2022 |
| Time Recorded | 12:13:00 PM |
| ansfer Tax Amount | \$3,960.00 |
| Document Number | 2022r-02300 |
| Book | 2022 |
| Page | 2300 |
| - | |

| DO NOT RI | E-PROCESS. | Form RI | ETTD | Time Recorded | 12:13:00 PM |
|---------------------------|----------------------------|---|-------------------------------|---|-------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$3,960.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-02300 |
| | | | | Book | 2022 |
| 2. Municipality BAT | H | | | Page | 2300 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name | e, MI; or business name | | | | 3b. SSN or federal ID |
| WAGG, GEOF | FREY K | | | | |
| 3c. Last name, first name | | | | | 3d. SSN or federal ID |
| WAGG, ALICI | | | | | |
| 3e. Mailing address after | | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 305 DANFORT | TH STREET | | PORTLAND | | ME 04102 |
| 4. GRANTOR/SELLER | | | | | Al- CON - a fadaral ID |
| 4a. Last name, first name | | | | | 4b. SSN or federal ID |
| BAYARD, VIN | NCE A | | | | |
| 4c. Last name, first name | | | | | 4d. SSN or federal ID |
| VOGL, MICHA | AEL S | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 305 WASHING | GTON STREET | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap | | |
| | 38 | 4 | No maps exis | erty being sold (see ins | |
| 5c. Physical location | | | Multiple parce Portion of par | | . Acreage (see instructions) |
| | GTON STREET | | Not applicable | | 0.14 |
| 6. TRANSFER TAX | | | | | |
| | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$900,000 |
| | 6b. Fair market value (Ei | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if eithe | grantor or grantee is claiming e | exemption from transfer t | ax and enter explanation below | <i>I</i> . |
| | | | | | |
| 7. DATE OF TRANSF | ED (MM DD VVVV) | 8. CLASSIFIED. WARNING | TO BUYER - If the r | property is classified as farn | nland. |
| 04-01-2022 | LIC (IVIIVI-DD-1111) | open space, tree growth, o be triggered by developme | r working waterfront, a | a substantial financial pena | |
| | 07411050 111 | | | | h = h |
| the transfer that sugge | est the price paid was | e any special circumstances either more or less than its f | air withho | ICOME TAX WITHHELD. T old Maine income tax becau | |
| market value? If yes, o | check the box and ente | er explanation below. | X S | eller has qualified as a Mai | ne resident |
| | | | | | from the State Tax Assessor |
| | | | | onsideration for the proper he transfer is a foreclosure | |
| 11. OATH. Aware of pe | enalties as set forth in | 36 M.R.S. § 4641-K, I decla | re that I have reviewe | d this return with the Grant | or(s) and Grantee(s) and |
| to the best of my know | vledge and belief the ir | formation contained herein | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| constitutes a legal sign | nature. | nd of which preparer has ar | , | | or arr electronic form return |
| PREPARER. Name of | preparer: JAMES H | OPKINSON | Phone numbe | r: (207) 772-5845 | |
| Mailing address: _ | 6 CITY CENTE | R SUITE 400 | Email address | s: jhopkinson@hablaw. | .com |
| _ | PORTLAND, M | E 04101 | Fax number:_ | | |
| | | | | | Ray 11/18 |

PROCESSED

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 04/05/2022 |
| Time Recorded | 01:44:00 PM |
| ransfer Tax Amount | \$0.00 |
| Document Number | 2022r-02378 |
| Book | 2022 |
| Page | 2378 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| | E-PROCESS. | Form RE | ETTD | Time Reco | rded C | 1:44:0 | 0 PM |
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| | | Do not use red ink. | | Transfer Tax Am | ount \$ | \$0.00 | |
| 1. County SAGA | ADAHOC | | | Document Nur | nber2 | 2022r-0 | 2378 |
| | | | | F | Book 2 | 2022 | |
| 2. Municipality BA | l`H | | | 1 | Page 2 | 2378 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PA | GE - REG | ISTRY US | SE ONLY |
| | me, MI; or business name | | | | | 3b. SSN | or federal ID |
| MAZONE II, | | | | | | 0.1.0011 | 6 1 115 |
| MAZONE, KI | ne, MI; or business name | | | | | 3d. SSN c | or federal ID |
| | er purchasing this property | | 3f. Municipality | | | 3g. State | 3h. ZIP Code |
| 1 NORTH ST | | | BATH | | | ME | 04530 |
| 4. GRANTOR/SELLE | | | | | | | V 10 0 |
| | me, MI; or business name | | | | | 4b. SSN o | r federal ID |
| MAZONE, KI | MBERLY L | | | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | | 4d. SSN o | r federal ID |
| | | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | | 4g. State | 4h. ZIP Code |
| 1 NORTH ST | REET | | BATH | | | ME | 04530 |
| | . Map Block | Lot Sub-lot | Check any t | hat apply 5b. Type of prop | perty - enter | | 0.000 |
| 0.11to12tt1 | 29 | 194 | No map | number that bes | st describes | the prop- | 202 |
| 5c. Physical location | | | | parcels | Ed Ao | , roogo (000 | instructions) |
| 1 NORTH ST | REET | | Not app | of parcel blicable | 0.3 | • . | instructions) |
| | | | | | 0.2 | | |
| 6. TRANSFER TAX | 6a. Purchase price (If the | transfer is a gift, enter "0") | | 6a. | \$(|) | . 00 |
| | 6b. Fair market value (En | ter a value only if you entered " | 0" or a nominal va | lue on line 6a) 6b. | \$6 | 541,600 | 00 |
| 6c. Exemption claim - | X Check the box if either | grantor or grantee is claiming e | xemption from tra | nsfer tax and enter explanatio | n below. | | |
| Transfer from | wife to husband a | nd wife for no consi | deration | | | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | TO BUYER - I | f the property is classified | as farmlar | nd, | |
| 03-31-2022 | , | open space, tree growth, or be triggered by developmen | | | | may | CLASSIFIED |
| | | any special circumstances | | 10. INCOME TAX WITHHE | | - | ot required to |
| | gest the price paid was e , check the box and ente | ither more or less than its for explanation below. $old X$ | | withhold Maine income tax ${f X}^-$ Seller has qualified as | | | |
| | | | | A waiver has been rec | | | e Tax Assessor |
| Transfer from | wife to husband a | nd wife for no consi | deration | Consideration for the part of the transfer is a forect | | | 1 \$50,000 |
| 11. OATH. Aware of | penalties as set forth in 3 | 66 M.R.S. § 4641-K, I declar | e that I have re | | | | intee(s) and |
| to the best of my kno | owledge and belief the inf ntor(s) and Grantee(s) ar | formation contained herein and of which preparer has an | is true, correct a | and complete. Declaration | of prepare | r is based | d on informa- |
| PREPARER. Name o | of preparer: CARLY JO | DYCE | Phone n | umber: (207) 761-7277 | 1 | | |
| Mailing address: | 970 BAXTER BI | | | | | | |
| | JIO BAXIER DI | LVD SUITE 204 | Email ad | ldress: carlys@tlsettle | ment.con | 1 | |
| | PORTLAND, MI | | Email ad | | ment.con | | . 11/10 |

PROCESSED

| Registry | SAGADAHOC |
|------------------|-------------------|
| Date Recorded | 04/08/2022 |
| Time Recorded | 09:25:00 AM |
| nsfer Tax Amount | \$1,980.00 |
| Document Number | 2022r-02442 |
| Book | 2022 |
| Page | 2442 |
| | ECICTDY LICE ONLY |

| 1. County SAGADAHOC 2. Municipanity BATH 3. GRANTEE/PURCHASER 3. Last rame, first name, Microbusiness name MCLAUGHLIN, AUDREY L 3b. SSN or federal ID MCLAUGHIN, AUDREY L 3c. Maintainess the purchasing this property 4c. SSN or federal ID 4c. SSN | | RE-PROCESS. | Form RETTD Do not use red ink. | | Time Recorded | 09:25:00 AM |
|--|---|---|----------------------------------|-------------------------|----------------------------------|--------------------------------|
| 2. Idunicipality BATH 3. GRANTEEPURCHASER 3. Last name, Mit or business name MCLAUGHLIN, AUDREY L 3. Last name, Mit or business name MCLAUGHLIN, AUDREY C 3. Maling address after purchasing hits property 3. Municipality 3. SN or federal ID MULLIGAN, ROBERT C 3. Maling address after purchasing hits property 3. RANGER CIR 4. SRANTORSELLER 4. GRANTORSELLER 4. Last reame, Mit or business name FAUTLEY, JORDAN 4. CLest name, Mit or Business name FAUTLEY-MABBETT, JAKE 4. Mailing address 4. Municipality 4. SSN or federal ID FAUTLEY-MABBETT, JAKE 4. Mailing address 4. Municipality 5. PROPERTY 5. PROPERTY 5. Map 6. Debt Assessed Control of the transfer is a gift, enter "0") 6. Fair market value (Enter a value only flyou entered "0" or a nominal value on line 6s) 6. Fair market value (Enter a value only flyou entered "0" or a nominal value on line 6s) 6. FERSIFER (MM.DD.YYYY) 7. DATE OF TRANSFER (MM.DD.YYYY) 8. CLASSIFIED WARNING TO BUYER - If the property is classified as farmland, ones space, tree growth, or working waterford, a substantial financial penalty may be ingened by development, subdivision, partition, or change in use. 7. DATE OF TRANSFER (MM.DD.YYYY) 9. SPECIAL CIRCUMSTANCES, Were there any space or less than its fair market value? If yes, check the box and enter explanation below. 11. QATH, Aware of penalties as set forth in 36 M.R.S. § 4641-K. I declare that I have reviewed this return with the Grantor(s) and Grantor(s) and Grantor(s) and Grantor(s) and Grantor(s) and Information conflained herein is frue, correct and complete. Declaration property is less than \$50,000 The transfer is a foreclosure sale 11. QATH, Aware of penalties as set forth in 36 M.R.S. § 4641-K. I declare that I have reviewed this return with the Grantor(s) and Information conflained herein is frue, correct and complete. D | | | | | Transfer Tax Amount | \$1,980.00 |
| 2. GRANTECPURCHASER 3. GRANTER, bits of business name MCLAUGHLIN, AUDREY L 3. GRANTER, bits of business name MULLIGAN, ROBERT C 3. Maining address after purchasing this property 3. Municipality 3. GRANTER, bits of business name MULLIGAN, ROBERT C 3. Maining address after purchasing this property 3. Municipality 3. Salte 3h, ZIP Code 3. Maining address after purchasing this property 4. Lest name, first name, Mit or business name FAUTLEY, JORDAN 4. GRANTORSELLER 4. Lest name, first name, Mit or business name FAUTLEY, MABBETT, JAKE 4. Salting address 4. Municipality 4. Salte 4h, ZIP Code 3. RANGER CIR 5. PROPERTY Salte Blook Lot Sub-lot Check any that apply No may sexist Multiple perceive and the property of the | 1. County SAGA | ADAHOC | | | Document Number | 2022r-02442 |
| S GRANTEE/PURCHASER 3 Last name, first name, Mirch business name MCLAUGHLIN, AUDREY L 3 Last name, first name, Mirch business name MULLIGAN, ROBERT C 3 Maining address after purchasing this propenty 3 RANGER CIR 4 GRANTONSELLER 4 Last name, first name, Mirch business name FAUTLEY, JORDAN 4 Last name, first name, Mirch business name FAUTLEY, JORDAN 4 Last name, first name, Mirch business name FAUTLEY MABBETT, JAKE 4 Mailing address S 3 RANGER CIR 5 PROPERTY 5s, Map. Block Lot. Sub-iot. No mass exist. Multiple parcels 5 Proping Sold (see instructions). 5 PROPERTY 5s, Map. Block Lot. Sub-iot. Multiple parcels 5 Proping Sold (see instructions). 6 Proping Sold (see instructions). 7 Proping Sold (see instructions). 8 Arrange (see instructions). 8 Arrange (see instructions). 9 Proping Sold (see instructions). 9 Propi | | | | | Book | 2022 |
| 38. Last name, Mit or business name MCLAUGHLIN, AUDREY L 36. Last name, first name, Mit business name MULLIGAN, ROBERT C 37. Municipality 38. State 39. ZIP Code 38. RANGER CIR 49. STANGER BATH ME 04530 40. SSN or federal ID 4 | 2. Municipality BA | ΓH | | | Page | 2442 |
| MCLAUGHLIN, AUDREY L 3c. Last name, first name, Mt. for business name MULLIGAN, ROBERT C 3c. Mailing address after purchasing this property 3f. Municipality 3g. State 3n. ZIP Code 3 RANGER CIR BATH ME 04530 4d. SSN or footeral ID FAUTILEY, JORDAN 4c. Last name, first name, Mt. or business name FAUTILEY, JORDAN 4c. Last name, first name, Mt. or Business name FAUTILEY, MABBETT, JAKE 4d. Municipality 4g. State 4f. Municipality 5g. Mailing address 4d. Municipality 4g. State 4d. SSN or footeral ID FAUTILEY, MABBETT, JAKE 4d. SSN or footeral ID FAUTILEY, MABBETT, JAKE 4d. SSN or footeral ID FAUTILEY, MABBETT, JAKE 4d. Municipality 5g. Mailing address 4d. Municipality 5g. Mailing address 4d. Municipality 6g. State 4d. Municipality 6g. State 4d. SSN or footeral ID 6g. State 4d. SSN or footeral ID 6g. State 6d. SSN or footer | 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - | REGISTRY USE ONLY |
| 30. SSN or federal ID MULLIGAN, ROBERT C 3 RANGER CIR BATH ME 04530 4. GRANTOR/SELLER 4a. Last name, first name, Mit or business name FAUTLEY, JORDAN 4c. Last name, first name, Mit or Business name FAUTLEY-MABBETT, JAKE 4e. Mailing address 3 RANGER CIR BATH 4d. SSN or federal ID FAUTLEY-MABBETT, JAKE 4e. Mailing address 4f. Municipality 4g. State 4d. SSN or federal ID FAUTLEY-HABBETT, JAKE 4e. Mailing address 3 RANGER CIR BATH ME 04530 5. PROPERTY 5a. Map Blick Lot 24 111 BATH Son maps owist Multiple parcels Portion of parcel 6b. Fair market value (Enter a value only if you antered '0' or a nominal value on line flap) | | | | | | 3b. SSN or federal ID |
| MULLIGAN, ROBERT C 3s. Maling address after purchasing this property 3s. Municipality 3g. State 3s. ZIP Code BATH ME 04530 4s. CRANTOR/SELLER 4s. Last name, first name, Mt or business name FAUTLEY, JORDAN 4c. Last name, first name, Mt or business name FAUTLEY-MABBETT, JAKE 4s. Mailing address: 4s. Municipality 4g. State 4s. SN or federal ID FAUTLEY-MABBETT, JAKE 4s. Mailing address: 4s. Municipality 4g. State 4s. SN or federal ID Add. SN ANGER CIR BATH ME 04530 5s. PROPERTY 5s. Map Block 111 Sub-lot Check any that spply No maps exist Multiple parcels Portion of parcel Not applicable 2c. 00 5sc. Type of property - enter the code number first of each describes the property being sold (see instructions) 5d. Acroage (see instructions) 1d. Acroage (see | | • | | | | |
| 36. Mailing address after purchasing this property 37. Municipality 38. State 38. ZIP Code 38. ANOTER CIR 40. GRANTOR/SELLER 41. Last rame, first name, MI or business name 42. SSN or federal ID 43. SSN or federal ID 44. SSN or federal ID 45. SSN or federal ID 46. SSN or federal ID 47. SSN or federal ID 48. SSN or federal ID 49. State 41. Municipality 49. State 41. ALTP Code 49. STATE 49. State 40. SSN or federal ID | | | | | | 3d. SSN or federal ID |
| 3 RANGER CIR 4a. Last name, first name, MI; or Business name FAUTLEY, JORDAN 4c. Last name, first name, MI; or Business name FAUTLEY-MABBETT, JAKE 4d. SSN or federal ID FAUTLEY-MABBETT, JAKE 5p. PROPERTY Sa. Map Block Lot Sub-lot Multiple parcels Portion of parcel you be part of the state of the sub-lot of parcel septembers of the state of the sub-lot of parcel septembers of the state of the sub-lot of parcel septembers of the sub-lot of su | | | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 4b. SSN or federal ID FAUTLEY, JORDAN 4c. Last name, first name, Mit or business name FAUTLEY-MABBETT, JAKE 4d. SSN or federal ID FAUTLEY-MABBETT, JAKE 4d. SSN or federal ID FAUTLEY-MABBETT, JAKE 4d. Milling address 3 RANGER CIR 5c. PROPERTY 5a. Map 10 Jordan Slock 11 Sub-lot 11 Sub-lot 124 Size 11 Sub-lot 124 Size 11 Sub-lot 124 Size 124 Size 124 Size 13 RANGER CIR 5c. Physical location 3 RANGER CIR 5c. Physical location 3 RANGER CIR 5d. Acreage (see instructions) 6db. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) | | | | | | |
| ## Autological Control of Parameters Ad. SSN or federal ID ## Autological ID FAUTLEY-MABBETT, JAKE ## Mailing address 4f. Municipality 4g. State 4h. ZIP Code ## ANGER CIR BATH ME 04530 ## O4530 ## O4530 ## O4530 5. PROPERTY 5a. Map Block Lot Sub-lot Check any that apply No maps exist Multiple parcels ## Multiple parcels Ad. Acreage (see instructions). ## O4530 3 RANGER CIR Not applicable 2.00 ## O4530 3 RANGER CIR Not applicable 2.00 ## O4530 O4530 O4530 ## O4530 O4530 O4530 ## O4530 O4530 O4530 ## O4530 O4530 O4530 O4530 ## O4530 O4530 O4530 O4530 ## O4530 O4530 O4530 O4530 O4530 ## O4530 O4530 O4530 O4530 O4530 O4530 ## O4530 | | | | | | |
| 4d. SSN or federal ID FAUTLEY-MABBETT, JAKE 4e. Mailing address 4f. Municipality 4g. State 4h. ZIP Code 3 RANGER CIR BATH ME 04530 5. PROPERTY 5a. Map Block Lot Sub-lot Number State Tax Assessor Consideration for the property is classified as a familiand, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as familiand, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as familiand, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as familiand, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that usuggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grancoff on the property is less than \$50,000 The transfer is a foreclosure sale 11. | 4a. Last name, first na | me, MI; or business name | | | | 4b. SSN or federal ID |
| ## AUTILEY-MABBETT, JAKE ## Maling address | FAUTLEY, JO | ORDAN | | | | |
| 46. Mailing address 47. Municipality 49. State 4h. ZIP Code ARANGER CIR BATH Check any that apply 24 | 4c. Last name, first nar | me, MI; or Business name | | | | 4d. SSN or federal ID |
| 3 RANGER CIR 5. PROPERTY 5a. Map Block Lot Sub-lot Part of Pa | FAUTLEY-M | ABBETT, JAKE | | | | |
| 3 RANGER CIR 5. PROPERTY 5a. Map Block Lot Sub-lot Part of Pa | 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 24 11 | G . | CIR | | , , | | |
| 24 11 Multiple parcels 5c. Physical location | 5. PROPERTY 5a | a. Map Block | Lot Sub-lot | Check any that a | apply 5b. Type of property - | enter the code |
| 5c. Physical location 3 RANGER CIR Not applicable 6a. Purchase price (if the transfer is a gift, enter "0") | | 24 | 11 | | erty being sold (see in | |
| 3 RANGER CIR 6a. Purchase price (if the transfer is a gift, enter "0") | 5c. Physical location | | | | | 5d. Acreage (see instructions) |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) | | CIR | | | | , |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) | 6 TRANSFER TAX | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as farmland, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | 51 11 5 11 15 1 2 1 1 1 1 1 1 | 6a. Purchase price (If the | transfer is a gift, enter "0") | | 6a. | \$450,000 .00 |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 04-04-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as farmland, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X. Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mark WALTZ Phone number: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | | 6b. Fair market value (Ent | er a value only if you entered " | O" or a nominal value o | on line 6a) 6b. | ■00 |
| open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X. Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | 6c. Exemption claim - | Check the box if either | grantor or grantee is claiming e | xemption from transfe | r tax and enter explanation belo | DW. |
| open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X. Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | | | | | | |
| open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X. Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | 7 DATE OF TRANS | FFR (MM-DD-YYYY) | 3. CLASSIFIED. WARNING | TO BUYER - If the | property is classified as fa | rmland, |
| 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. X Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mark WALTZ Phone number: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | |) | open space, tree growth, or | working waterfront | , a substantial financial per | altv mav |
| the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. X Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mark WALTZ Phone number: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | 9. SPECIAL CIRCUI | | | | | The buyer is not required to |
| A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | the transfer that sug | gest the price paid was e | ther more or less than its fa | | | |
| Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | market value? II yes | , check the box and enter | explanation below. | | • | |
| 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | | | | | | |
| to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | | | | | The transfer is a foreclosur | e sale |
| PREPARER. Name of preparer: MARK WALTZ Phone number: (207) 798-4611 Mailing address: PO BOX 177 BRUNSWICK, ME 04011 Fax number: Fax number: | to the best of my kno tion provided by Gra | owledge and belief the inf ntor(s) and Grantee(s) an | ormation contained herein | s true, correct and o | complete. Declaration of pro | eparer is based on informa- |
| Mailing address: PO BOX 177 Email address: mmw@cascobaytitle.com BRUNSWICK, ME 04011 Fax number: | PREPARER. Name of | of preparer: MARK WA | ALTZ | Phone numb | per: (207) 798-4611 | |
| Tax number. | | DO DOM 155 | | Email addres | ss: mmw@cascobaytit | le.com |
| | | BRUNSWICK, M | IE 04011 | Fax number: | | |

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| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 04/08/2022 |
| Time Recorded | 03:02:00 PM |
| ansfer Tax Amount | \$1,414.60 |
| Document Number | 2022r-02469 |
| Book | 2022 |
| Page | 2469 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. | Form RI | ETTD | Time Recorded | 03:02:00 PM |
|---|--|--------------------------------|--|---|
| | Do not use | red ink. | Transfer Tax Amount | \$1,414.60 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02469 |
| 2. Municipality BATH | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2469 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | REGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | 9 | | | 3b. SSN or federal ID |
| GOULD, JENNIFER L | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this propert | v | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 4 ELM STREET COURT | , | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | |
| 4a. Last name, first name, MI; or business name |) | | | 4b. SSN or federal ID |
| 4 ELM STREET COURT, LL | C, | | | |
| 4c. Last name, first name, MI; or Business name | • | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 5280 W 115TH PL, APT 610 | | LEAWOOD | | KS 66211 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | | |
| 26 | 228 | No maps exist | erty being sold (see ins | , |
| 5c. Physical location | | Multiple parce Portion of pare | _ | I. Acreage (see instructions) |
| 4 ELM STREET | | Not applicable | | 0.00 |
| 6. TRANSFER TAX | | | 0.5 | Ф221 200 |
| ba. Purchase price (II | the transfer is a gift, enter "0") | | oa. | \$321,200 |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | ■00 |
| 6c. Exemption claim - Check the box if eith | ner grantor or grantee is claiming | exemption from transfer t | ax and enter explanation below | V. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | . , | • |
| 04-08-2022 | open space, tree growth, o be triggered by developme | | • | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were the | | | | he buyer is not required to |
| the transfer that suggest the price paid wa market value? If yes, check the box and el | | | old Maine income tax beca | |
| • • | | | eller has qualified as a Mai waiver has been received | from the State Tax Assessor |
| | | | onsideration for the proper | |
| | | | he transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth i to the best of my knowledge and belief the | information contained herein | is true, correct and co | mplete. Declaration of pre | parer is based on informa- |
| tion provided by Grantor(s) and Grantee(s) constitutes a legal signature. | | | | of an electronic form return |
| PREPARER. Name of preparer: LYNN I | BILODEAU | Phone numbe | r: (207) 874-0500 | |
| Mailing address: 70 CENTER S | TREET | Email address | . Lynn@mclaughlintit | tle.com |
| PORTLAND, | ME 04101 | Fax number:_ | | Rev. 11/18 |
| | | | | |

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| Registry | SAGADAHOC |
|------------------|--------------------|
| Date Recorded | 04/11/2022 |
| Time Recorded | 09:10:00 AM |
| nsfer Tax Amount | \$440.00 |
| Document Number | 2022r-02476 |
| Book | 2022 |
| Page | 2476 |
| DOOK/DAGE D | ECICEDY/LIGE CNILY |

| DO NOT R | E-PROCESS. | Form RE | ETTD | Time Recorded | 09:10:00 AM |
|---------------------------|--|--|--------------------------|--|------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$440.00 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-02476 |
| | | | | Book | 2022 |
| 2. Municipality BA | I'H | | | Page | 2476 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | me, MI; or business name | | | | 3b. SSN or federal ID |
| HILL, ADAM | | | | | 01.0011 6.1 115 |
| HRANICH, R | ne, MI; or business name | | | | 3d. SSN or federal ID |
| , | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| _ | IEW LANE, UNI | Γ1 | BATH | | ME 04530 |
| 4. GRANTOR/SELLI | | | | | |
| 4a. Last name, first name | me, MI; or business name | | | | 4b. SSN or federal ID |
| BOARDBUIL | DERS INC, | | | | |
| 4c. Last name, first nan | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| PO BOX 205 | | | BATH | | ME 04530 |
| 5. PROPERTY 5a | ı. Map Block | Lot Sub-lot | Check any that ap | | |
| | 9 | 9-1 | No maps exis | erty being sold (see ins | 1/1/ |
| 5c. Physical location | | | Multiple parce | | . Acreage (see instructions) |
| 0 RIDGE RD | | | Not applicable | | 1.64 |
| 6. TRANSFER TAX | 6a Purchasa price (If the | transfer is a gift, enter "0") | | 62 | ¢100,000 |
| | od. i dionado prioc (ii dio | tunion is a girt, enter o j | | | \$100,000 |
| | 6b. Fair market value (Er | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if either | grantor or grantee is claiming e | xemption from transfer t | tax and enter explanation below | <i>i</i> . |
| | | | | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | | |
| 04-08-2022 | 2 | open space, tree growth, or be triggered by developmen | | | CLASSIFIED |
| | | any special circumstances | | ICOME TAX WITHHELD. T | |
| | gest the price paid was or , check the box and ento | either more or less than its fa er explanation below. | | old Maine income tax becau | |
| | | | | eller has qualified as a Mai waiver has been received | from the State Tax Assessor |
| | | | | Consideration for the propert | |
| 44 04711 4 | | 20 M D O 0 4044 K I I I I | | the transfer is a foreclosure | |
| to the best of my know | wledge and belief the in | 36 M.R.S. § 4641-K, I declar formation contained herein | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| constitutes a legal si | gnature. | nd of which preparer has an | y knowledge. I under | stand that the submission of | of an electronic form return |
| | of preparer: MARK W | ALTZ | Phone numbe | er: (207) 798-4611 | |
| Mailing address: | PO BOX 177 | | Email address | mmw@cascobaytitle | .com |
| | BRUNSWICK, I | ME 04011 | Fax number: | | |
| | DRONS WICK, I | VIE 0 1011 | Fax Hullibel | | Rev 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|-------------|
| Date Recorded | 04/11/2022 |
| Time Recorded | 01:15:00 PM |
| ransfer Tax Amount | \$594.00 |
| Document Number | 2022r-02502 |
| Book | 2022 |
| Page | 2502 |
| | |

| DO NOT RE-PROCES | | | Time Recorded | 01:15:00 PM |
|--|---|--|---|---|
| | Do not use | e red ink. | Transfer Tax Amount | \$594.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02502 |
| 2. Municipality RATH | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2502 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business | | | | 3b. SSN or federal ID |
| KING-WHITE, WENDY | | | | |
| 3c. Last name, first name, MI; or business | name | | | 3d. SSN or federal ID |
| WHITE, JOSEPH 3e. Mailing address after purchasing this p | uron orty | 2f Municipality | | 3g. State 3h. ZIP Code |
| 11 SKYLARK ROAD | торену | 3f. Municipality PORTLAND | | 3g. State 3h. ZIP Code ME 04103 |
| | | TORTLAND | | WIE 04103 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business | s nama | | | 4b. SSN or federal ID |
| G & G REALTY, LLC, | name | | | is. Server redectar is |
| | | | | |
| 4c. Last name, first name, MI; or Business | name | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 106 FOREST GLEN LAN | E | TOPSHAM | | ME 04086 |
| | lock Lot Sub-lot | Check any that ap | number that best descr | ihas the prop |
| 24 | 014-001 | No maps exist Multiple parce | erty being sold (see ins | 5(1) |
| 5c. Physical location | | Portion of pare | | . Acreage (see instructions) |
| 1B AEGIS DRIVE, UNIT | 1B | Not applicable | | 0.00 |
| 6. TRANSFER TAX | ce (If the transfer is a gift, enter "0") | | 6a | \$135,000 .00 |
| · | • | | | \$133,000 |
| 6b. Fair market v | value (Enter a value only if you entered | I "0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - Check the box | c if either grantor or grantee is claiming | exemption from transfer to | ax and enter explanation below | I. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YY | | | roperty is classified as farn | |
| 04-08-2022 | open space, tree growth, be triggered by development | | a substantial financial pena on, or change in use. | Ity may CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Wer | | | COME TAX WITHHELD. T | he buver is not required to |
| the transfer that suggest the price pai | id was either more or less than its | • | old Maine income tax becau | |
| market value? If yes, check the box a | nd enter explanation below. | | eller has qualified as a Mai | |
| | | | waiver has been received onsideration for the proper | from the State Tax Assessor tv is less than \$50.000 |
| | | | ne transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set for to the best of my knowledge and belief tion provided by Grantor(s) and Grantoconstitutes a legal signature. PREPARER. Name of preparer: CHA | of the information contained herein tee(s) and of which preparer has a | n is true, correct and co any knowledge. I unders | mplete. Declaration of prep | parer is based on informa- |
| 10 5 1371 | STREET, SUITE 200 | | : jwood@blackpointtit | le com |
| | | | . Jwood w orackpointing | ic.com |
| PORTLAN | ND, ME 04101 | Fax number:_ | | Dov. 41/10 |

| Registry | SAGADAHOC |
|---------------------|------------------|
| Date Recorded | 04/12/2022 |
| Time Recorded | 11:58:00 AM |
| Transfer Tax Amount | \$0.00 |
| Document Number | 2022r-02527 |
| Book | 2022 |
| Page | 2527 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE- | PROCESS | Form RI | ETTD | Time Recorded | 11:58:0 | 0 AM |
|---|--|--|--|--|--|--|
| Donoria | 1100235. | Do not use | red ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGAD | АНОС | | | Document Number | 2022r-0 | 2527 |
| | | | | Book | 2022 | |
| 2. Municipality BATH | | | | Page | 2527 | |
| 3. GRANTEE/PURCHAS | SER | | | BOOK/PAGE - | REGISTRY US | SE ONLY |
| 3a. Last name, first name, N | • | | | | 3b. SSN o | or federal ID |
| CITY OF BATH, 3c. Last name, first name, N | • | | | | 24 SSN a | or federal ID |
| Sc. Last Hame, inst Hame, iv | ii, or business name | | | | 3u. 33N 0 | i lederal ID |
| 3e. Mailing address after pu | rchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 55 FRONT STRE | EET | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER | | | | | | |
| 4a. Last name, first name, N | • | | | | | r federal ID |
| REGIONAL SCH | HOOL UNIT NO | . 1: LOWER KEN | NEBEC REG | ON SCHOOL UNI | T, | |
| 4c. Last name, first name, M | II; or Business name | | | | 4d. SSN o | r federal ID |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 34 WING FARM | I PARKWAY | | BATH | | ME | 04530 |
| 5c. Physical location 826 HIGH STRE | 6 | Lot Sub-lot | Check any that a No maps ex Multiple par Portion of particular Not applicat | number that best des erty being sold (see i cels | scribes the prop- | 520 instructions) |
| 6. TRANSFER TAX | | | | | | |
| | Durchago prico (If the tra | notor is a gift ontor "O") | | 60 | ¢Ω | 0.0 |
| 68 | a. Purchase price (If the tra | nsfer is a gift, enter "0") | | 6a. | \$0 | . 00 |
| | | nsfer is a gift, enter "0") | | | \$0 \$15,771, | |
| 66 | o. Fair market value (Enter | a value only if you entered " | 0" or a nominal value o | | \$15,771, | |
| 66 | o. Fair market value (Enter Check the box if either gra | a value only if you entered " | 0" or a nominal value o | on line 6a) 6b. | \$15,771, | |
| 6c. Exemption claim - $ { m X} $ | c. Fair market value (Enter Check the box if either gra DVernmental entit (MM-DD-YYYY) 8. | a value only if you entered " antor or grantee is claiming e y to another CLASSIFIED. WARNING | 0" or a nominal value of exemption from transfe G TO BUYER - If the record waterfront | on line 6a) 6b. Tax and enter explanation bel property is classified as fa, a substantial financial per | \$15,771, ow. | |
| 6c. Exemption claim - X Deed from one go 7. DATE OF TRANSFER | c. Fair market value (Enter Check the box if either grad povernmental entite (MM-DD-YYYY) 8. op be CANCES. Were there and the price paid was eith | a value only if you entered " antor or grantee is claiming or y to another CLASSIFIED. WARNING en space, tree growth, or triggered by development y special circumstances er more or less than its for | o" or a nominal value of exemption from transfer or BUYER - If the reworking waterfront ont, subdivision, particular with the reworking water or the subdivision of the | on line 6a) 6b. Tax and enter explanation bel property is classified as fa, a substantial financial per | \$15,771, ow. The buyer is neause: aine resident d from the State erty is less than | CLASSIFIED ot required to |
| 6c. Exemption claim - X Deed from one go 7. DATE OF TRANSFER 04-05-2022 9. SPECIAL CIRCUMST the transfer that suggest market value? If yes, che 11. OATH. Aware of penato the best of my knowled tion provided by Grantor (constitutes a legal signate) | c. Fair market value (Enter Check the box if either grad Devernmental entities (MM-DD-YYYY) 8. Op be CANCES. Were there and the price paid was eith each the box and enter each the price paid was eith each the box and enter each the grad belief the inform (s) and Grantee(s) and ture. | a value only if you entered " antor or grantee is claiming e y to another CLASSIFIED. WARNING en space, tree growth, or triggered by development y special circumstances er more or less than its fix planation below. M.R.S. § 4641-K, I declaimation contained herein of which preparer has an | o" or a nominal value of exemption from transfer or STO BUYER - If the record with the record | property is classified as fa, a substantial financial pertion, or change in use. NCOME TAX WITHHELD. hold Maine income tax becomes the substantial financial pertion, or change in use. | \$15,771, ow. armland, nalty may The buyer is neause: aine resident d from the State erty is less thance sale ntor(s) and Graveparer is based | CLASSIFIED ot required to e Tax Assessor a \$50,000 entee(s) and d on informa- |
| 6c. Exemption claim - X Deed from one go 7. DATE OF TRANSFER 04-05-2022 9. SPECIAL CIRCUMST the transfer that suggest market value? If yes, che 11. OATH. Aware of penato the best of my knowled tion provided by Grantor(| c. Fair market value (Enter Check the box if either grad Devernmental entities (MM-DD-YYYY) 8. Op be CANCES. Were there and the price paid was eith each the box and enter each the price paid was eith each the box and enter each the grad belief the inform (s) and Grantee(s) and ture. | a value only if you entered "antor or grantee is claiming enter or space, tree growth, or triggered by development y special circumstances er more or less than its fix planation below. M.R.S. § 4641-K, I declaimation contained herein of which preparer has an acceptable of the second s | o" or a nominal value of exemption from transfer or BUYER - If the record with | property is classified as fa, a substantial financial pertion, or change in use. NCOME TAX WITHHELD. hold Maine income tax become t | \$15,771, ow. armland, halty may The buyer is neause: aine resident d from the State erty is less than re sale ntor(s) and Gra reparer is based n of an electron | CLASSIFIED ot required to e Tax Assessor a \$50,000 entee(s) and d on informa- |
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| Registry | SAGADAHOC |
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| Date Recorded | 04/12/2022 |
| Time Recorded | 02:16:00 PM |
| ransfer Tax Amount | \$734.80 |
| Document Number | 2022r-02537 |
| Book | 2022 |
| Page | 2537 |
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| Do not use | e red ink. | Transfer Tax Amount | \$734.80 |
| 1. County SAGADAHOC | | Document Number | 2022r-02537 |
| | | Book | 2022 |
| 2. Municipality BATH | | Page | 2537 |
| 3. GRANTEE/PURCHASER | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | 3b. SSN or federal ID |
| MULLA-EVERETT, MAJLINDA | | | Od OON and adams ID |
| 3c. Last name, first name, MI; or business name EVERETT, KRISTOPHER M | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 25 OFFICE DRIVE, UNIT 1 | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | |
| 4a. Last name, first name, MI; or business name | | | 4b. SSN or federal ID |
| MAXWELL PROPERTIES, LLC, | | | |
| 4c. Last name, first name, MI; or Business name | | | 4d. SSN or federal ID |
| | | | |
| 4e. Mailing address | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 37 CASH STREET | SOUTH PC | ORTLAND | ME 04106 |
| 5. PROPERTY 5a. Map Block Lot Sub-lot | Check any that | | |
| 19 133 | No maps e | erty being sold (see ins | 5/17 |
| 5c. Physical location | Multiple par Portion of p | | . Acreage (see instructions) |
| 25 OFFICE DRIVE, UNIT 1 FKA UNIT 25 | Not applica | | 0.00 |
| 6. TRANSFER TAX | | | |
| 6a. Purchase price (If the transfer is a gift, enter "0") | | ба. | \$167,000 |
| 6b. Fair market value (Enter a value only if you entered | d "0" or a nominal value | on line 6a) 6b. | .00 |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming | g exemption from transfe | er tax and enter explanation belov | J. |
| | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 8. CLASSIFIED. WARNII | NG TO BUYER - If the | e property is classified as farr | nland, |
| 04-12-2022 open space, tree growth, be triggered by developm | • | t, a substantial financial pena tition, or change in use. | lty may CLASSIFIED |
| SPECIAL CIRCUMSTANCES. Were there any special circumstance | | INCOME TAX WITHHELD. T | he buyer is not required to |
| the transfer that suggest the price paid was either more or less than its market value? If yes, check the box and enter explanation below. | s fair with | nhold Maine income tax becar | |
| Thanket value: If yes, creak the box and enter explanation below. | X | Seller has qualified as a Mai A waiver has been received | |
| | | Consideration for the proper | |
| | | The transfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I dec to the best of my knowledge and belief the information contained herei tion provided by Grantor(s) and Grantee(s) and of which preparer has constitutes a legal signature. | in is true, correct and | complete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of preparer: MELISSA CUMMINGS | Phone num | ber: (207) 553-2190 | |
| Mailing address: 25 SPRING STREET, SUITE A | | | |
| | Email addre | ess: missy@treworgy-bal | dacci.com |

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| Registry | SAGADAHOC |
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| Date Recorded | 04/13/2022 |
| Time Recorded | 11:02:00 AM |
| ransfer Tax Amount | \$3,009.60 |
| Document Number | 2022r-02561 |
| Book | 2022 |
| Page | 2561 |
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| | | Do not use | red ink. | Transfer Tax Amount | \$3,009.60 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-02561 |
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| 2. Municipality BA | I`H | | | Page | 2561 |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | me, MI; or business name | | | | 3b. SSN or federal ID |
| | | RUST DATED JAN | UARY 19, 2021 | 1, | |
| 3c. Last name, first nar | me, MI; or business name | | | | 3d. SSN or federal ID |
| 3a Mailing address after | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 12 BRYANT | | | FRAMINGH | IAM | MA 01701 |
| 4. GRANTOR/SELLI | | | T IO IIVIII VOIT | 17 1171 | WII 01701 |
| | me, MI; or business name | | | | 4b. SSN or federal ID |
| TILLOTSON, | C. ROGER | | | | |
| 4c. Last name, first name | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | MARGARET D | | | | id. Self of loadial ib |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 167 KENSING | GTON ROAD | | GARDEN C | ITY | NY 11530 |
| | ı. Map Block | Lot Sub-lot | Check any that a | | |
| J. FROI EIGHT | 1 | 24 | No maps exis | number that best descr | ribes the prop- |
| Fo Dhysical location | | | Multiple parce | _ | A Acrosso (one instructions) |
| 5c. Physical location 41 WEST CH | OPS POINT | | Portion of pa | | I. Acreage (see instructions) 4.40 |
| | OIBIONI | | | | 7.70 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$684,000 .00 |
| | 6b. Fair market value (E | nter a value only if you entered " | '0" or a nominal value or | n line 6a) 6b. | .00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming e | exemption from transfer | tax and enter explanation below | V. |
| | | | | | |
| 7 DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | G TO BUYER - If the | property is classified as far | mland. |
| 04-13-2022 | | | r working waterfront, | a substantial financial pena | |
| 9 SPECIAL CIRCUI | MSTANCES Were there | e any special circumstances | · · · · · · · · · · · · · · · · · · · | NCOME TAX WITHHELD. T | he buver is not required to |
| the transfer that sug | | either more or less than its f | | old Maine income tax beca | |
| market value? II yes | , check the box and ent | er explanation below. | | Seller has qualified as a Mai | ne resident from the State Tax Assessor |
| | | | | Consideration for the proper | |
| | | | 7 | The transfer is a forcelesure | sale |
| to the best of my kno tion provided by Gra constitutes a legal si | | | | The transfer is a foreclosure | |
| | owledge and belief the in ntor(s) and Grantee(s) a gnature. | 36 M.R.S. § 4641-K, I decla aformation contained herein and of which preparer has ar | re that I have reviewe is true, correct and co ny knowledge. I unde | ed this return with the Grant omplete. Declaration of pre rstand that the submission | parer is based on informa- |
| PREPARER. Name of | owledge and belief the in ntor(s) and Grantee(s) a | nformation contained herein and of which preparer has ar | re that I have reviewe is true, correct and co ny knowledge. I unde | ed this return with the Grant omplete. Declaration of pre | parer is based on informa- |
| PREPARER. Name of Mailing address: | wiledge and belief the in ntor(s) and Grantee(s) a gnature. of preparer: JOHN T. | nformation contained herein and of which preparer has an VOORHEES, JR. | re that I have reviewed is true, correct and control to the contro | ed this return with the Grant omplete. Declaration of pre rstand that the submission | parer is based on informa- of an electronic form return |
| | wiledge and belief the in ntor(s) and Grantee(s) a gnature. of preparer: JOHN T. | nformation contained herein and of which preparer has an VOORHEES, JR. | re that I have reviewed is true, correct and control to the contro | ed this return with the Grant omplete. Declaration of prestand that the submission error (207) 729-1667 s:ewhite@midcoasttitl | parer is based on informa- of an electronic form return |

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| Registry | SAGADAHOC |
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| Date Recorded | 04/13/2022 |
| Time Recorded | 12:58:00 PM |
| ansfer Tax Amount | \$697.40 |
| Document Number | 2022r-02608 |
| Book | 2022 |
| Page | 2608 |
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| | Do not use r | ed ink. | Transfer Tax Amount | \$697.40 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02608 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2608 |
| 3. GRANTEE/PURCHASER | | Į | BOOK/PAGE - F | REGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | ne | | | 3b. SSN or federal ID |
| FINLEY, WILLIAM C | | | | |
| 3c. Last name, first name, MI; or business nam | ne | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this prope | erty | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 85 DUMMER STREET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | |
| 4a. Last name, first name, MI; or business name | ne | | | 4b. SSN or federal ID |
| BARANELLO, EMILY V | | | | |
| 4c. Last name, first name, MI; or Business name | ne | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 296 WOODFORD STREET | APT 3 | PORTLAND | | ME 04103 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that appl | | |
| 21 | 141 | No maps exist | number that best desc erty being sold (see in: | |
| 5c. Physical location | | Multiple parcels Portion of parce | _ | d. Acreage (see instructions) |
| 85 DUMMER STREET | | Not applicable | | 0.13 |
| 6. TRANSFER TAX | If the transfer is a gift, enter "0") | | 6a | ФО 00 |
| od. i dionaso prioc (i | The transfer is a girt, officer or j | | | \$0 |
| 6b. Fair market value | /E | | 0) 01 | #150 2 00 |
| | e (Enter a value only if you entered "0 | " or a nominal value on lii | ne 6a) 6b. | \$158,300 |
| 6c. Exemption claim - Check the box if e | e (Enter a value only if you entered "0 | | | |
| 6c. Exemption claim - Check the box if e | | | | |
| 6c. Exemption claim - Check the box if e 7. DATE OF TRANSFER (MM-DD-YYYY | wither grantor or grantee is claiming extended as the control of t | xemption from transfer tax | and enter explanation below | w. mland, |
| | ither grantor or grantee is claiming ex | remption from transfer tax TO BUYER - If the proworking waterfront, a | and enter explanation below operty is classified as far substantial financial pena | w. mland, |
| 7. DATE OF TRANSFER (MM-DD-YYYY 03-07-2022 9. SPECIAL CIRCUMSTANCES. Were the | 8. CLASSIFIED. WARNING open space, tree growth, or be triggered by developmenthere any special circumstances were stated to the control of th | TO BUYER - If the proworking waterfront, a t, subdivision, partition with | operty is classified as far substantial financial pena n, or change in use. | mland, alty may CLASSIFIED The buyer is not required to |
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| Registry | SAGADAHOC |
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| Date Recorded | 04/15/2022 |
| Time Recorded | 10:58:00 AM |
| ansfer Tax Amount | \$1,760.00 |
| Document Number | 2022r-02680 |
| Book | 2022 |
| Page | 2680 |
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| 1. County SAGA | DAHOC | | | Document Number | 2022r-02680 |
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| 2. Municipality BAT | [H | | | Page | 2680 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| · · | ne, MI; or business name | | | | 3b. SSN or federal ID |
| BACH, NICO | | | | | |
| BACH, GREG | ne, MI; or business name | | | | 3d. SSN or federal ID |
| · | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 29 WOODBU | | | GLOUCEST | TER | MA 01930 |
| 4. GRANTOR/SELLE | ER | | | | |
| 4a. Last name, first nam | ne, MI; or business name | | | | 4b. SSN or federal ID |
| NEPERUD, E | RIC C | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| NEPERUD, SA | ANDRA S | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 733 W JACKS | SON AVENUE | | SPOKANE | | WA 99205 |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot | Check any that a | apply 5b. Type of property - e | ibaa tha araa |
| | 27 | 220 | No maps ex Multiple pard | erty being sold (see ins | 7/11 |
| 5c. Physical location | | | Portion of pa | | l. Acreage (see instructions) |
| 4 UNION STR | REET COURT | | Not applicab | ble | 0.00 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$400,000 .00 |
| | 01. 5 : | | 1.40 | (° - 0 -) | |
| | | nter a value only if you entered | | | ■00 |
| 6c. Exemption claim - | Check the box if eithe | r grantor or grantee is claimino | g exemption from transfer | rtax and enter explanation below | V. |
| | | | | | |
| 7. DATE OF TRANSF | | | | property is classified as farr , a substantial financial pena | Ity may |
| 04-15-2022 | | be triggered by developm | ent, subdivision, parti | tion, or change in use. | CLASSIFIED |
| | | e any special circumstance either more or less than its | | NCOME TAX WITHHELD. T hold Maine income tax becau | |
| 00 | check the box and ente | | | Seller has qualified as a Mai | ne resident |
| | | | | | from the State Tax Assessor |
| | | | | Consideration for the proper The transfer is a foreclosure | |
| | | | | ed this return with the Grant | |
| | | | | complete. Declaration of preperstand that the submission of | |
| constitutes a legal sig | | | , | per: (207) 553-2190 | |
| | | | | er: (207) 333 2190 ss: missy@treworgy-bal | dacci com |
| Mailing address: | 25 SPRING STF SCARBOROUC | | | | uacci.com |
| | SCARDURUUC | 111, IVIE U4U/4 | Fax number: | | |

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| Date Recorded | 04/15/2022 |
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| nsfer Tax Amount | \$1,672.00 |
| Document Number | 2022r-02683 |
| Book | 2022 |
| Page | 2683 |
| BOOK/DVCE D | ECISTRY LISE ONLY |

| DO NOT RI | E-PROCESS. | Form RI | ETTD | Time Recorded | 01:26:00 PM |
|--|---|---|---------------------------------|--|----------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,672.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-02683 |
| | | | | Book | 2022 |
| 2. Municipality BAT | H | | | Page | 2683 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name | e, MI; or business name | | | | 3b. SSN or federal ID |
| ZILICH, CHRI | STOPHER P. | | | | |
| 3c. Last name, first name | , , | | | | 3d. SSN or federal ID |
| ZILICH, SHAN | | | Of Municipality | | 2a State 2b 7ID Code |
| 3e. Mailing address after 1051 HIGH ST | | | 3f. Municipality BATH | | 3g. State 3h. ZIP Code ME 04530 |
| | | | ВАТП | | WIE 04330 |
| 4. GRANTOR/SELLE 4a. Last name, first nam | | | | | 4b. SSN or federal ID |
| BEAUCHAME | | | | | |
| | , | | | | 41.001. 6.1.110 |
| 4c. Last name, first name | P, BARYSHNIK | Λ \$ | | | 4d. SSN or federal ID |
| DEACCIAMI | , DAN I SIININ | AS. | | | |
| 4e. Mailing address | | - | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 1141 WASHIN | IGTON STREET | Ľ | BATH | | ME 04530 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap No maps exis | number that best descr erty being sold (see ins | ibes the prop- |
| 5c. Physical location | | | Multiple parce | | . Acreage (see instructions) |
| 1051 HIGH ST | REET | | Not applicable | | 0.16 |
| 6. TRANSFER TAX | | | | | |
| | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$380,000 |
| | 6b. Fair market value (Ei | nter a value only if you entered ' | '0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer t | ax and enter explanation below | I. |
| | | | | | |
| 7. DATE OF TRANSF | FR (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | G TO BUYER - If the p | property is classified as farn | mland, |
| 04-14-2022 | | open space, tree growth, o be triggered by developme | | | Ity may CLASSIFIED |
| 9. SPECIAL CIRCUM | STANCES. Were there | any special circumstances | with 10. IN | ICOME TAX WITHHELD. T | |
| | est the price paid was check the box and ente | either more or less than its f er explanation below. | | old Maine income tax becau | |
| | | | | eller has qualified as a Mai waiver has been received | from the State Tax Assessor |
| | | | C | consideration for the proper | ty is less than \$50,000 |
| | | | Т | he transfer is a foreclosure | sale |
| to the best of my know | vledge and belief the ir tor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla formation contained herein and of which preparer has ar | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of | preparer: ANGEL B | BROADWATER | Phone numbe | er: (207) 729-9740 | |
| Mailing address: _ | P.O. BOX 924 | | Email address | s: _angel@broadwaterla | w.org |
| _ | BRUNSWICK, | ME 04011 | Fax number:_ | | |
| | | | | | Ray 11/18 |

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC 04/15/2022 Date Recorded

| | E-PROCESS. | Form RI | ETTD | Time Recorded | 01:39:00 |) PM |
|--|---|---|--|--|--|-------------------|
| Donoria | L TROCESS. | Do not use red ink. | | Transfer Tax Amount | \$3,907.2 | 20 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-0 | 2689 |
| | | | | Book | 2022 | |
| 2. Municipality BAT | H | | | Page | 2689 | |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - I | REGISTRY US | E ONLY |
| 3a. Last name, first name | | | | | | or federal ID |
| | | RUST UNDERDEC | CLARATION (| OF TRUST DATED | | |
| 3c. Last name, first name KINDER, GRE | | | | | 3d. SSN o | r federal ID |
| 3e. Mailing address after | | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 24 GROVE AV | | | HINGHAM | | MA | 02043 |
| 4. GRANTOR/SELLEI | R | | | | | |
| 4a. Last name, first name | e, MI; or business name | | | | 4b. SSN or | r federal ID |
| GROSE, KIME | BERLY A | | | | | |
| 4c. Last name, first name | e, MI; or Business name | | | | 4d. SSN or | r federal ID |
| MCCOY, SIOE | BAN | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 1479 WASHIN | IGTON STREET | | BATH | | ME | 04530 |
| 5c. Physical location | Map Block 13 IGTON STREET | Lot Sub-lot 58 | Check any that a No maps ex Multiple pare Portion of pa Not applicat | number that best described erty being sold (see in cels arcel 5 | cribes the prop- | 201 instructions) |
| 6. TRANSFER TAX | Go Durahaga price (If the | e transfer is a gift, enter "0") | | 60 | Ф000 000 | |
| | oa. I dichase price (ii the | e transier is a girt, enter 0 / | | | \$888,000 | 00 |
| | 6b. Fair market value (Er | nter a value only if you entered ' | 0" or a nominal value o | on line 6a) 6b. | | . 00 |
| 6c. Exemption claim - | Check the box if either | grantor or grantee is claiming e | exemption from transfer | r tax and enter explanation belo | W. | |
| | | | | | | |
| 7. DATE OF TRANSFI 04-15-2022 | ER (MM-DD-YYYY) | | r working waterfront | property is classified as far , a substantial financial pen tion, or change in use. | altv mav | CLASSIFIED |
| the transfer that sugge | | any special circumstances either more or less than its f er explanation below. | air withl | NCOME TAX WITHHELD. hold Maine income tax because Seller has qualified as a Ma A waiver has been received Consideration for the proper | ause: aine resident I from the State | e Tax Assessor |
| | | | | Consideration for the prope The transfer is a foreclosur | • | ψου,ουυ |
| to the best of my know tion provided by Grant constitutes a legal sign | vledge and belief the ir tor(s) and Grantee(s) a nature | 36 M.R.S. § 4641-K, I decla formation contained herein nd of which preparer has ar EA TITLE SERVICES . | is true, correct and only knowledge. I unde | complete. Declaration of pre | eparer is based | l on informa- |
| Mailing address: _ | | | | | | |
| | 1711 CONGRES | SS STREET | Email addres | ss: titles@bayareatitle.c | com | |
| _ | PORTLAND, M | | Email addres | | | 11/18 |

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC 04/15/2022 Date Recorded

| DO NOT RE-PROCESS. | Form RETTD Do not use red ink. | | Time Recorded | 02:28:00 |) PM |
|---|--|--|--|-----------------------------------|----------------|
| Do nor la ricolos. | | | Transfer Tax Amount | \$1,848.0 | 00 |
| 1. County SAGADAHOC | | | Document Number | 2022R-0 |)2693 |
| | | | Book | 2022 | |
| 2. Municipality BATH | | | Page | 2693 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY US | E ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN o | r federal ID |
| JONES MILLER LLC, | | | | 24 CCN o | r federal ID |
| 3c. Last name, first name, MI; or business name | | | | 30. 33N O | rederal ID |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 450 WASHINGTON STREET | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or | federal ID |
| RAYMOND GROUP HOLDIN | GS, LLC, | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or | federal ID |
| | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 5 WREN ACRES ROAD | | GEORGETO | WN | ME | 04562 |
| 5. PROPERTY 5a. Map Block 31 5c. Physical location | Lot Sub-lot 057 | Check any that ap No maps exis Multiple parce Portion of pa | number that best descr erty being sold (see insels | ibes the prop- | 301 |
| 94 RICHARDSON STREET | | Not applicabl | | 0.23 | |
| 6. TRANSFER TAX | | | | | |
| 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$420,000 | ■00 |
| 6b. Fair market value (Er | nter a value only if you entered | "0" or a nominal value or | line 6a)6b. | | . 00 |
| 6c. Exemption claim - Check the box if either | grantor or grantee is claiming | exemption from transfer | tax and enter explanation below | v. | |
| | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 04-15-2022 | | or working waterfront, | property is classified as farr a substantial financial pena on, or change in use. | ltv mav | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was a market value? If yes, check the box and enter | either more or less than its t | fair withh | NCOME TAX WITHHELD. Toold Maine income tax beca | use: | ot required to |
| | | A . | Seller has qualified as a Mai waiver has been received Consideration for the proper The transfer is a foreclosure | from the State ty is less than | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the intion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | formation contained herein nd of which preparer has a | is true, correct and cony knowledge. I under | omplete. Declaration of prepretand that the submission of | oarer is based | on informa- |
| PREPARER. Name of preparer: DRUMMO | | | er: (207) 774-0317 | | |
| Mailing address: ONE MONUME | | Email address | sherrick@ddlaw.con | 1 | |
| PORTLAND, M | E 04101 | Fax number: | | Rev | . 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 04/20/2022 |
| Time Recorded | 12:58:00 PM |
| ransfer Tax Amount | \$748.00 |
| Document Number | 2022r-02783 |
| Book | 2022 |
| Page | 2783 |
| _ | EGISTRY USE ONLY |

| DO NOT RE-PI | ROCESS. | Form RETTD | | Time Recorded | 12:58:00 PM | |
|--|------------------------------------|---------------------------|--|---|--|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$748.00 | |
| 1. County SAGADAI | HOC | | | Document Number | 2022r-02783 | |
| 2. Municipality RATH | | | | Book | 2022 | |
| 2. Municipality BATH | | | | Page | 2783 | |
| 3. GRANTEE/PURCHASE | ₹ | | | BOOK/PAGE - R | EGISTRY USE ONLY | |
| 3a. Last name, first name, MI; o | | | | | 3b. SSN or federal ID | |
| BARTELMANN, F | | | | | | |
| 3c. Last name, first name, MI; c | | | | | 3d. SSN or federal ID | |
| BULINSKI, JACO | | | Of Municipality | | 2a State 2b ZID Code | |
| 3e. Mailing address after purchase 282 DERBY STRE | | | 3f. Municipality SALEM | | 3g. State 3h. ZIP Code MA 01970 | |
| | £1,#0 | | SALEM | | WIA 01970 | |
| 4. GRANTOR/SELLER 4a. Last name, first name, MI; | or husiness name | | | | 4b. SSN or federal ID | |
| CLARK, ANDREW | | | | | 15. Gelt of loddfall IB | |
| , | | | | | | |
| 4c. Last name, first name, MI; c | or Business name | | | | 4d. SSN or federal ID | |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 4 SCAMMON STR | REET, SUITE 19-31 | 14 | SACO | | ME 04072 | |
| 5. PROPERTY 5a. Map | Block Lo | | Check any that app | number that best descr | ihas the prop | |
| 27 | 6 | 52 | No maps exist Multiple parcel | erty being sold (see ins | | |
| 5c. Physical location | | | Portion of parc | | I. Acreage (see instructions) | |
| 816 MIDDLE STR | EET | | Not applicable | | 0.00 | |
| 6. TRANSFER TAX | urchase price (If the transfer is | a gift enter "0") | | 6a | \$160,000 | |
| ou. i | aronado pride (ir trie transfer it | ou girt, critter o j | | di. | \$169,900 .00 | |
| 6b. Fa | air market value (Enter a value | e only if you entered "0" | or a nominal value on | line 6a) 6b. | ■00 | |
| 6c. Exemption claim - Ch | eck the box if either grantor or | grantee is claiming ex | emption from transfer ta | ax and enter explanation below | V. | |
| | | | | | | |
| 7. DATE OF TRANSFER (M | MM-DD-YYYY) 8. CLAS | SIFIED. WARNING | TO BUYER - If the p | roperty is classified as farr | mland, | |
| 04-19-2022 | open spa | | working waterfront, a t, subdivision, partitio | i substantial financial pena in, or change in use. | lty may CLASSIFIED | |
| 9. SPECIAL CIRCUMSTAN | | | | | The buyer is not required to | |
| the transfer that suggest the | e price paid was either mo | re or less than its fai | | ld Maine income tax becar | | |
| market value? If yes, check | the box and enter explana | ation below. | | eller has qualified as a Mai | | |
| | | | | waiver has been received onsideration for the proper | from the State Tax Assessor tv is less than \$50,000 | |
| | | | | ne transfer is a foreclosure | • | |
| 11. OATH. Aware of penaltic | | | | | | |
| to the best of my knowledge tion provided by Grantor(s) | | | | | | |
| constitutes a legal signature |). | | , and the second | | | |
| PREPARER. Name of prepa | | | | (207) 289-2255 | | |
| 0 | MUSSEY ROAD, ST | E 3 | Email address | Sharon.Getchell@ste | ewart.com | |
| So | CARBOROUGH, NH (| | | | | |

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC 04/20/2022 Date Recorded

| DO NOT RE- | PROCESS | Form RETTD Do not use red ink. | | Time Recorded | 01:05:00 PM | |
|---|--|--|--|--|--|---|
| Do nor ita | | | | Transfer Tax Amount | \$0.00 | |
| 1. County SAGAD | AHOC | | | Document Number | 2022r-0 | 2790 |
| | | | | Book | 2022 | |
| 2. Municipality BATH | | | | Page | 2790 | |
| 3. GRANTEE/PURCHAS | SER | | | BOOK/PAGE - | REGISTRY US | SE ONLY |
| 3a. Last name, first name, M | /II; or business name | | | | 3b. SSN o | or federal ID |
| STIRES, JULIA | M b | | | | 0-L 00N - | n fordenel ID |
| 3c. Last name, first name, M | ii; or business name | | | | 30. SSN 0 | r federal ID |
| 3e. Mailing address after pur | rchasing this property | 3f. | Municipality | | 3g. State | 3h. ZIP Code |
| 19 PINE HILL D | RIVE | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER | | | | | | |
| 4a. Last name, first name, N | | | | | 4b. SSN o | r federal ID |
| STIRES, A. MCK | KINNE | | | | | |
| 4c. Last name, first name, M | II; or Business name | | | | 4d. SSN o | r federal ID |
| STIRES, SUSAN | TE. | | | | | |
| 4e. Mailing address | | 4f. | Municipality | | 4g. State | 4h. ZIP Code |
| 75 POST OFFICE | E ROAD | | WESTPORT | ISLAND | ME | 04578 |
| 5. PROPERTY 5a. M | | Sub-lot 19 | No maps exis | number that best des erty being sold (see | scribes the prop- | 502 |
| 5c. Physical location 19 PINE HILL D | RIVE | | Multiple parce Portion of par Not applicabl | cel | 5d. Acreage (see 0.00 | instructions) |
| 19 PINE HILL D | | ift enter "0") | Portion of par Not applicabl | cel e | 0.00 | |
| 19 PINE HILL D | ı. Purchase price (If the transfer is a g | , | Portion of par Not applicabl | cel =6a. | \$0.00 | instructions) |
| 19 PINE HILL D | | , | Portion of par Not applicabl | cel =6a. | 0.00 | |
| 19 PINE HILL D 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X | ı. Purchase price (If the transfer is a g | y if you entered "0" o | Portion of par Not applicabl | cel e | 0.00 \$0 \$38,190 | ■00 |
| 19 PINE HILL D 6. TRANSFER TAX 6a 6b | Purchase price (If the transfer is a g Fair market value (Enter a value onle | y if you entered "0" o | Portion of par Not applicabl | cel e | 0.00 \$0 \$38,190 | ■00 |
| 19 PINE HILL D 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X | p. Purchase price (If the transfer is a government). Fair market value (Enter a value only Check the box if either grantor or grant (MM-DD-YYYY) 8. CLASSIFI open space, | y if you entered "0" ontee is claiming exerence. ED. WARNING To tree growth, or wo | Portion of par Not applicable or a nominal value or applion from transfer O BUYER - If the orking waterfront, | cel e | 0.00 \$0 \$38,190 ow. | ■00 |
| 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X parent to child 7. DATE OF TRANSFER 04-19-2022 9. SPECIAL CIRCUMST the transfer that suggest | p. Purchase price (If the transfer is a government). Fair market value (Enter a value only Check the box if either grantor or grant (MM-DD-YYYY) 8. CLASSIFI open space, | y if you entered "0" on the is claiming exer ED. WARNING To tree growth, or we by development, so circumstances with | Portion of particles Not applicable or a nominal value or a nominal value or a notion from transfer D BUYER - If the porking waterfront, subdivision, partiting the second of the second | cel ine 6a) 6b. ax and enter explanation beloroperty is classified as factors as substantial financial per | 0.00 \$0 \$38,190 ow. The buyer is neause: laine resident d from the Staterty is less than | LOO CLASSIFIED ot required to |
| 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X parent to child 7. DATE OF TRANSFER 04-19-2022 9. SPECIAL CIRCUMSTA the transfer that suggest market value? If yes, che 11. OATH. Aware of pena to the best of my knowled tion provided by Grantor(constitutes a legal signate | a. Purchase price (If the transfer is a g b. Fair market value (Enter a value only Check the box if either grantor or grant (MM-DD-YYYY) 8. CLASSIFI open space, be triggered ANCES. Were there any special of the price paid was either more of eck the box and enter explanation alties as set forth in 36 M.R.S. § 4 dige and belief the information continued in the price paid was either more of eck the box and enter explanation and grantee(s) and of which pure. | y if you entered "0" of thee is claiming exerning exernin | Portion of particles of the price of the pri | cel | 0.00 \$0 \$38,190 ow. The buyer is neause: aine resident d from the Staterty is less than re sale intor(s) and Graveparer is based | CLASSIFIED ot required to e Tax Assessor a \$50,000 |
| 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X parent to child 7. DATE OF TRANSFER 04-19-2022 9. SPECIAL CIRCUMST the transfer that suggest market value? If yes, che 11. OATH. Aware of pena to the best of my knowled tion provided by Grantor(constitutes a legal signate PREPARER. Name of pre | a. Purchase price (If the transfer is a go. Fair market value (Enter a value only check the box if either grantor or grant (MM-DD-YYYY) 8. CLASSIFI open space, be triggered and the price paid was either more of each the box and enter explanation alties as set forth in 36 M.R.S. § 4 dge and belief the information corts; and Grantee(s) and of which pure. By arer: JULIE CRIDER | y if you entered "0" of the is claiming exerometer is claiming exerometer in the interest of t | Portion of particles of the portion of particles of the portion from transfer of the portion of transfer of transf | cel | \$0.00 \$10 \$38,190 Sarmland, halty may The buyer is not ause: laine resident d from the State erty is less than are sale Intor(s) and Grateparer is based in of an electron | CLASSIFIED ot required to e Tax Assessor a \$50,000 |
| 6. TRANSFER TAX 6a 6b 6c. Exemption claim - X parent to child 7. DATE OF TRANSFER 04-19-2022 9. SPECIAL CIRCUMSTA the transfer that suggest market value? If yes, che 11. OATH. Aware of penato the best of my knowled tion provided by Grantor(constitutes a legal signate PREPARER. Name of pre Mailing address: | a. Purchase price (If the transfer is a g b. Fair market value (Enter a value only Check the box if either grantor or grant (MM-DD-YYYY) 8. CLASSIFI open space, be triggered ANCES. Were there any special of the price paid was either more of eck the box and enter explanation alties as set forth in 36 M.R.S. § 4 dge and belief the information conts) and Grantee(s) and of which pure. | y if you entered "0" of the is claiming exerometer is claiming exerometer in the interest of t | Portion of particles of the portion of particles of the portion from transfer of the portion of transfer of transf | cel | \$0.00 \$10 \$38,190 Sarmland, halty may The buyer is not ause: laine resident d from the State erty is less than are sale Intor(s) and Grateparer is based in of an electron | CLASSIFIED ot required to e Tax Assessor a \$50,000 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 04/25/2022 |
| Time Recorded | 12:29:00 PM |
| ansfer Tax Amount | \$3,740.00 |
| Document Number | 2022r-02886 |
| Book | 2022 |
| Page | 2886 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 12:29:00 PM |
|--|---|----------------------------|--------------------------------|-------------------------------|
| | Do not use | red ink. | Transfer Tax Amount | \$3,740.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02886 |
| 2 Municipality DATH DATH | | | Book | 2022 |
| 2. Municipality BATH, BATH | | | Page | 2886 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| SHELLE REALTY LLC, | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| 20 Mailing address ofter purchasing this property | | 2f Municipality | | 2a State 2b 7ID Code |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | n. | 3g. State 3h. ZIP Code |
| 119 FOREST STREET | | WORCESTE | K | MA 01609 |
| 4. GRANTOR/SELLER | | | | Ab. CCN or fodorol ID |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| DURP LLC, | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| P.O. BOX 883 | | CUMBERLA | ND | ME 04021 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that app | | |
| 27 | 153 | No maps exist | erty being sold (see ins | |
| 5c. Physical location | | X Multiple parcel | | l. Acreage (see instructions) |
| 676 WASHINGTON STREET | | X Portion of parc | | 0.39 |
| | | | | 0.37 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$850,000 .00 |
| 6b. Fair market value (Er | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | " 00 |
| 6c. Exemption claim - Check the box if either | r grantor or grantee is claiming e | evenntion from transfer to | ay and enter evolunation below | |
| of examplion dains | grantor or grantee is claiming t | | ax and enter explanation below | v - |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | Ity may |
| 04-18-2022 | be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | · . | | COME TAX WITHHELD. T | he buyer is not required to |
| the transfer that suggest the price paid was a market value? If yes, check the box and enter | | | eller has qualified as a Mai | |
| | | | • | from the State Tax Assessor |
| | | C | onsideration for the proper | ty is less than \$50,000 |
| | | Ti | ne transfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the in | | | | |
| tion provided by Grantor(s) and Grantee(s) a | | | | |
| constitutes a legal signature. PREPARER. Name of preparer: SANDRA | FLANAGAN | Phone number | (401) 270-1144 | |
| 602 W. I DDEN | | | Sandy@limalawoffic | Pes com |
| | | Email address | - Sandy & Illiaiawollic | co.com |
| EAST PROVIDI | ENCE, KI 02914 | Fax number:_ | | Rev. 11/18 |
| | | | | |

MAINE REVENUE SERVICES SUPPLEMENT TO THE REAL ESTATE TRANSFER TAX FORM

This form is to be used in conjunction with the Real Estate Transfer Tax Form and provides additional information when necessary.

Please attach this form to the original transfer tax form before submitting to the County Registry of Deeds.

Use additional forms as necessary.

If you have any questions, please contact the property Tax Division at 207-287-2013 or e-mail: prop.tax@maine.gov.

| Additional Grantees/Purchasers – Last Name First | Social Security or Fed. ID # |
|--|------------------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| Additional Grantors/Sellers – Last Name First | Social Security or Fed. ID # |
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. _ | |
| 6. | |
| 7. | |
| 8. | |

| Additional Municipalities | Map—Block—Lot—Sub-Lot |
|---------------------------|-----------------------|
| 1. BATH | 27 - 154 - |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|--------------------|
| Date Recorded | 04/26/2022 |
| Time Recorded | 12:52:00 PM |
| ansfer Tax Amount | \$783.20 |
| Document Number | 2022r-02908 |
| Book | 2022 |
| Page | 2908 |
| 5000055 | EQUATRY LIGHT ONLY |

| DO NOT R | E-PROCESS. | Form RETTD | | Time Recorded | 12:52:00 PM |
|---------------------------|---|--|-------------------------------|--|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$783.20 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-02908 |
| | | | | Book | 2022 |
| 2. Municipality BAT | Ή | | | Page | 2908 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nam | e, MI; or business name | | | | 3b. SSN or federal ID |
| HARKINS, TH | IOMAS I. | | | | |
| 3c. Last name, first name | e, MI; or business name | | | | 3d. SSN or federal ID |
| | | | | | |
| | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 1 LILAC STRE | | | BATH | | ME 04530 |
| 4. GRANTOR/SELLE | R ne, MI; or business name | | | | 4b. SSN or federal ID |
| PETTENGILL. | • | | | | 4b. 33N of federal ib |
| | , | | | | 41.001 |
| 4c. Last name, first name | HEATHER L. | | | | 4d. SSN or federal ID |
| FETTENGILL | , IILATIILK L. | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 13 PRINCE ST | TREET | | CUMBERLA | AND | ME 04021 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap | number that best descr | ibos the prop |
| | 31 | 78 | No maps exist Multiple parce | erty being sold (see ins | tructions). |
| 5c. Physical location | | | Portion of pare | cel 5d | . Acreage (see instructions) |
| 1 LILAC STRE | EET | | Not applicable | • | 0.11 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$178,000 .00 |
| | | | | | \$170,000 |
| | 6b. Fair market value (E | nter a value only if you entered ' | '0" or a nominal value on | line 6a) 6b. | . 00 |
| 6c. Exemption claim - | Check the box if either | er grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | I. |
| | | | | | |
| 7. DATE OF TRANSF | ER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | . , | |
| 04-25-2022 | | open space, tree growth, o be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUM | STANCES. Were there | e any special circumstances | with 10. IN | ICOME TAX WITHHELD. T | |
| | est the price paid was check the box and ent | either more or less than its f er explanation below. | | old Maine income tax becau | |
| | | | | eller has qualified as a Mai waiver has been received | ne resident from the State Tax Assessor |
| | | | | onsideration for the proper | |
| | | | Т | he transfer is a foreclosure | sale |
| to the best of my know | vledge and belief the inter(s) and Grantee(s) | 36 M.R.S. § 4641-K, I decla nformation contained herein and of which preparer has ar | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of | | BROADWATER | Phone numbe | r: (207) 729-9740 | |
| Mailing address: _ | P.O. BOX 924 | | Email address | : angel@broadwaterla | w.org |
| | BRUNSWICK, | ME 04011 | Fax number: | | |
| _ | | | | | Rev. 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------------|
| Date Recorded | 04/27/2022 |
| Time Recorded | 10:34:00 AM |
| ansfer Tax Amount | \$1,540.00 |
| Document Number | 2022r-02921 |
| Book | 2022 |
| Page | 2921 |
| | ECICTRY LICE ONLY |

| DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 10:34:00 AM |
|---|---|----------------------------------|--------------------------------|----------------------------------|
| | Do not use red ink. | | Transfer Tax Amount | \$1,540.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02921 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2921 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| DIECKMANN, KATHLEEN I | 3 | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| FLORES, III, GEORGE H | | Of Municipality | | 2 - Charles - 2 la 7 la Carda |
| 3e. Mailing address after purchasing this property 154 NORTHERN AVENUE | | 3f. Municipality AUGUSTA | | 3g. State 3h. ZIP Code ME 04330 |
| | | AUGUSTA | | WIL 04330 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| INDA, ASHLEY M | | | | |
| | | | | Art. CON our fordered UD |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 5 DIKE ROAD | | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap No maps exist | number that best descr | ibes the prop- |
| 28 | 254 | Multiple parce | erty being sold (see ins | structions). |
| 5c. Physical location | | Portion of pare | cel 5d | l. Acreage (see instructions) |
| 5 DIKE ROAD | | Not applicable | | 0.08 |
| 6. TRANSFER TAX 6a. Purchase price (If the | ne transfer is a gift, enter "0") | | 6a. | \$350,000 .00 |
| | | | | |
| · | | | , | ■00 |
| 6c. Exemption claim - Check the box if either | er grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | V. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | . , | |
| 04-25-2022 | be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were ther | e any special circumstances | with 10. IN | COME TAX WITHHELD. T | he buyer is not required to |
| the transfer that suggest the price paid was market value? If yes, check the box and en | | | eller has qualified as a Mai | |
| | | | | from the State Tax Assessor |
| | | | onsideration for the proper | |
| 44 OATH Assess of marchines and facilities | 20 M D O C 4044 K L d- d- | | he transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ition provided by Grantor(s) and Grantee(s) | nformation contained herein | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| constitutes a legal signature. | | , | | or an older of the form return |
| PREPARER. Name of preparer: JESSICA | | | r: (207) 622-5801 | |
| Mailing address:150 STATE ST | REET | Email address | : Loans@kennebecsav | rings.bank |
| AUGUSTA, M | | | | |

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MAINE REAL ESTATE TRANSFER TAX DECLARATION

SAGADAHOC Registry Date Recorded 04/27/2022 02:08:00 PM

| DO NOT RE-PROCESS. | Form RE | :TTD | Time Recorded | 02:08:00 PM |
|---|---|-------------------------------|--|--|
| Do Nortal Modelson | Do not use red ink. | | Transfer Tax Amount | \$1,566.40 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02933 |
| 2 Municipality D A THI | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2933 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| CASEY, RYAN J | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| 20 Mailing address ofter numbering this preparty | | Of Municipality | | 2a State 2b 7ID Code |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 476 MIDDLE STREET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| CHASE, LIV R | | | | 4b. 33W of federal ID |
| CHASE, ELV K | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| PO BOX 15372 | | PORTLAND | | ME 04112 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e number that best descr | ibas the prop |
| 33 | 157 | No maps exist Multiple parce | erty being sold (see ins | |
| 5c. Physical location | | Portion of pare | | l. Acreage (see instructions) |
| 476 MIDDLE STREET | | Not applicable | | 0.08 |
| 6. TRANSFER TAX | transfer is a gift, enter "0") | | 60 | Φ25 < 000 00 |
| oa. i dichase pilce (ii tile | tuansier is a girt, enter 0 / | | va. | \$356,000 |
| 6b. Fair market value (Er | nter a value only if you entered "C | or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - Check the box if either | grantor or grantee is claiming ex | xemption from transfer to | ax and enter explanation below | v. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | TO BUYER - If the p | roperty is classified as farn | mland, |
| 04-26-2022 | open space, tree growth, or be triggered by developmen | | | Ity may CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | any special circumstances | with 10. IN | COME TAX WITHHELD. T | The buyer is not required to |
| the transfer that suggest the price paid was emarket value? If yes, check the box and enter | either more or less than its fa | ir withho | old Maine income tax becau | use: |
| market value : If yes, check the box and ente | er explanation below. | 2.1 | eller has qualified as a Mai | ne resident from the State Tax Assessor |
| | | | onsideration for the proper | |
| | | TI | ne transfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in 3 to the best of my knowledge and belief the in tion provided by Grantor(s) and Grantee(s) a | formation contained herein is | s true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| constitutes a legal signature. PREPARER. Name of preparer: CARLY Jo | OYCE | Phone number | r: (207) 761-7277 | |
| Mailing address: 970 BAXTER B | | | : carlys@tlsettlement.c | com |
| PORTLAND, M | E 04103 | Fax number: | • | |
| | | r ax number | | Rev. 11/18 |

PROCESSED ONLINE.

MAINE REAL ESTATE TRANSFER TAX DECLARATION

SAGADAHOC Registry Date Recorded 04/28/2022 00.37.00 AM

| DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 09:37:00 AM |
|--|---|----------------------------|--|------------------------------|
| | Do not use red ink. | | Transfer Tax Amount | \$2,855.60 |
| 1. County SAGADAHOC | | | Document Number | 2022r-02943 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 2943 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| REGIE L WOLFF REVOCAB | LE TRUST, | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| | | | | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 641 RAWLS AVENUE | | SARASOTA | | FL 34236 |
| 4. GRANTOR/SELLER | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| TYLER, JENNIFER C | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| TYLER, SCOTT A | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 108 CAMBRIA WALK | | ALEXANDR | IA | VA 22304 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that app | | |
| 26 | 258-412 | No maps exist | erty being sold (see ins | 5(1) |
| 5c. Physical location | | Multiple parcel | | . Acreage (see instructions) |
| 285 FRONT ST., UNIT 102 | | Not applicable | | 0.00 |
| · · · · · · · · · · · · · · · · · · · | | | | |
| 6. TRANSFER TAX 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$649,000 .00 |
| 6b. Fair market value (E | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | .00 |
| 6c. Exemption claim - Check the box if eithe | er grantor or grantee is claiming e | evenntion from transfer to | ay and enter evolunation below | |
| oneck the bex it dails | or granted to diaming t | sxomption from transfer to | ax and onto explanation bolow | |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | ltv mav |
| 04-18-2022 | be triggered by developme | nt, subdivision, partitic | on, or change in use. | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was | , , | | COME TAX WITHHELD. T old Maine income tax becau | |
| market value? If yes, check the box and ent | | <u></u> | eller has qualified as a Mai | |
| | | | • | from the State Tax Assessor |
| | | | onsideration for the proper | |
| | | TI | ne transfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the in | | | | |
| tion provided by Grantor(s) and Grantee(s) a | | | | |
| constitutes a legal signature. PREPARER. Name of preparer: MARK W | VALTZ | Phone number | (207) 798-4611 | |
| Mailing address: PO BOX 177 | | | mmw@cascobaytitle | .com |
| BRUNSWICK, | ME 0/011 | | title | |
| BRUNSWICK, | WIL UTUII | Fax number:_ | | Rev. 11/18 |

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| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 04/29/2022 |
| Time Recorded | 02:35:00 PM |
| ransfer Tax Amount | \$0.00 |
| Document Number | 2022r-02993 |
| Book | 2022 |
| Page | 2993 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. | Form RI | Form RETTD Do not use red ink. | | 02:35:00 | PM |
|---|--|---------------------------------|---|--------------------|--------------|
| | Do not use | | | \$0.00 | |
| 1. County SAGADAHOC | | | Document Number | 2022r-02 | 993 |
| O Manistralita D A TIVI | | | Book | 2022 | |
| 2. Municipality BATH | | | Page | 2993 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - F | REGISTRY USE | ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or | federal ID |
| BILOKONSKY, COURTNEY | | | | 0-l 00N | in devel ID |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or f | ederai ID |
| 3e. Mailing address after purchasing this propert | У | 3f. Municipality | | 3g. State 3 | Bh. ZIP Code |
| 705 MIDDLE STREET, APT | 2 | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | • | | | 4b. SSN or f | ederal ID |
| BILOKONSKY MIDCOAST | PROPERTIES, LLC, | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or f | ederal ID |
| | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4 | Ih. ZIP Code |
| 1600 GRANBY STREET | | NORFOLK | | | 23510 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that | apply 5b. Type of property - | enter the code | |
| 26 | 31 | No maps ex | erty being sold (see in | | 207 |
| 5c. Physical location | | Multiple par Portion of p | _ | d. Acreage (see in | structions) |
| 119 OAK STREET | | Not applica | | 0.00 | , |
| 6. TRANSFER TAX | | | | | |
| 6a. Purchase price (If | the transfer is a gift, enter "0") | | 6a. | \$0 | ■00 |
| 6b. Fair market value (| Enter a value only if you entered " | 0" or a nominal value | on line 6a) 6b. | \$193,000 | ■00 |
| 6c. Exemption claim - $ {f X} $ Check the box if eith | ner grantor or grantee is claiming e | exemption from transfe | er tax and enter explanation belo | W. | |
| TRANSFER PER TERMS OF | DIVORCE | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | G TO BUYER - If the | e property is classified as far | mland, | |
| 04-29-2022 | open space, tree growth, o be triggered by developme | | t, a substantial financial pena ition, or change in use. | alty may | LASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were the | | | INCOME TAX WITHHELD. | The buyer is not | required to |
| the transfer that suggest the price paid wa market value? If yes, check the box and er | s either more or less than its f | | hold Maine income tax beca | use: | |
| market value: II yes, oneok the box and el | itel explanation below. A | | Seller has qualified as a Ma A waiver has been received | | Tax Assessor |
| TRANSFER PER TERMS OF | DIVORCE | | Consideration for the prope | | |
| | | | The transfer is a foreclosure | sale | |
| 11. OATH. Aware of penalties as set forth i to the best of my knowledge and belief the | information contained herein | is true, correct and | complete. Declaration of pre | parer is based o | on informa- |
| tion provided by Grantor(s) and Grantee(s) constitutes a legal signature. | • • | , | | of an electronic | Torm return |
| PREPARER. Name of preparer: CHARL | ES JONATHAN WOOD | Phone numl | ber: (207) 553-4919 | | |
| Mailing address:10 DANA STR | REET, SUITE 200 | Email addre | ss: jwood@blackpointti | tle.com | |
| PORTLAND, I | ME 04101 | Fax number | | Pay | |

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| SAGADAHOC |
|-------------|
| 05/02/2022 |
| 12:59:00 PM |
| \$413.60 |
| 2022r-03042 |
| 2022 |
| 3042 |
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| DO NOT R | E-PROCESS. | Form R | ETTD | Time Recorded | 12:59:00 PM |
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| | | Do not use red ink. | | Transfer Tax Amount | \$413.60 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03042 |
| | | | | Book | 2022 |
| 2. Municipality BA7 | l'H | | | Page | 3042 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | me, MI; or business name | | | | 3b. SSN or federal ID |
| WESTERN V. | ALLEY LLC, | | | | |
| 3c. Last name, first nan | ne, MI; or business name | | | | 3d. SSN or federal ID |
| 3e Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 13 SEA COVE | | | CUMBERLA | AND | ME 04110 |
| 4. GRANTOR/SELLE | | | CONBERC | | 1112 01110 |
| | me, MI; or business name | | | | 4b. SSN or federal ID |
| WELLS FARO | GO BANK, | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 1 MORTGAG | EWAY | | MOUNT LA | UREL | NJ 08054 |
| | . Map Block | Lot Sub-lot | Check any that a | | |
| | 20 | 184 | X No maps exi | number that best descr st erty being sold (see ins | |
| 5c. Physical location | | | Multiple parc | | l. Acreage (see instructions) |
| | R STREET, BAT | H, ME 04530 | Not applicab | | 0.26 |
| 6. TRANSFER TAX | | | | | |
| | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$94,000 |
| | 6b. Fair market value (E | nter a value only if you entered ' | '0" or a nominal value o | n line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming | exemption from transfer | tax and enter explanation below | v. |
| | | | | | |
| 7. DATE OF TRANSI | FER (MM-DD-YYYY) | | | property is classified as farr | |
| 04-25-2022 | 2 | open space, tree growth, o be triggered by developme | | a substantial financial pena ion, or change in use. | lty may CLASSIFIED |
| 9. SPECIAL CIRCUM | MSTANCES. Were there | e any special circumstances | with 10. II | NCOME TAX WITHHELD. T | he buyer is not required to |
| 0, | gest the price paid was , check the box and ent | either more or less than its fer explanation below. | | nold Maine income tax becau | |
| , | , | | | Seller has qualified as a Mai A waiver has been received | ne resident from the State Tax Assessor |
| N/A | | | | Consideration for the proper | ty is less than \$50,000 |
| | | | | The transfer is a foreclosure | sale |
| to the best of my kno tion provided by Gran constitutes a legal sig | owledge and belief the in ntor(s) and Grantee(s) a gnature. | nformation contained herein and of which preparer has an | is true, correct and c ny knowledge. I unde | ed this return with the Grant complete. Declaration of preperstand that the submission of | parer is based on informa- |
| PREPARER. Name o | of preparer: SHIDLIN | GESH B | Phone numb | er: (770) 612-7007 | |
| Mailing address: | | | | | |
| | 1000 ABERNA | ΓHY ROAD | Email addres | ss: Shidlingesh.B@altise | ource.com |
| | 1000 ABERNA ATLANTA, GA | | Email addres | | ource.com Rev. 11/18 |

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| Registry | SAGADAHOC |
|-------------------|--------------------|
| Date Recorded | 05/02/2022 |
| Time Recorded | 02:34:00 PM |
| ansfer Tax Amount | \$1,584.00 |
| Document Number | 2022r-03047 |
| Book | 2022 |
| Page | 3047 |
| D001//D105 D | ECICEDY LICE CALLY |

| 1. Country SAGADAHOC 2. Municipality BATH 3. GRANTEE/PURCHASER 3.047 BOOK/PAGE - REGISTRY USE ONLY 3. BLast name, first name, Mit or business name 3. St. SSN or federal ID BENEMAN, LISA 3. Last name, first name, Mit or business name 3. St. SSN or federal ID BENEMAN, LISA 3. Last name, first name, Mit or business name CINQ-MARS, DANA 3. Malling address after perchasing this groperty 3. Municipality 3. St. SSN or federal ID 3. SSN or federal ID 3. SSN or federal ID 3. SSN or federal ID 4. SSN or federal ID | DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 02:34:00 PM |
|--|--|------------------------------------|--------------------------|---|-----------------------------|
| 2. Municipality BATH 3. GRANTEEPURCHASER 3.047 3. GRANTEEPURCHASER 3.047 BOOK/PAGE - REGISTRY USE ONLY 3. Set Set rame, first name, first or business name BENEMAN, LISA 3. Least name, first name, first or business name CINO-MARS, DANA 3. Municipality 3. Municipality 3. Municipality 3. Sate 3th 2/IP Code ME 04530 19 MAXWELL STREET BATH ME 04530 46. SSN or federal ID CLast name, first name | | Do not use red ink. | | Transfer Tax Amount | \$1,584.00 |
| 3. GRANTECPURCHASER 36. Last name, first name, Mit or business name BENEMAN, LISA 36. Last name, first name, Mit or business name CINQ-MARS, DANA 36. Maining address after purchasing this property 37. Municipality 39. State 39. State 30. SSN or federal ID 40. SSN or federal ID 50. SSN or | 1. County SAGADAHOC | | | Document Number | 2022r-03047 |
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| 3e. Last name. first name. Mit or business name ENEMAN, LISA 3c. Last name frame and the protein strains and stra | 2. Mullicipanty BATH | | | Page | 3047 |
| 3c. Last name. first name. Mt. or business name Casa Mailing address after purchasing this property St. Municipality 3d. SSN or federal ID 4d. GRANTOR/SELLER BATH ME 04530 4d. SSN or federal ID 4d. Last name. first name. Mt. or Business name 4d. SSN or federal ID 4d. Last name. first name. Mt. or Business name 4d. SSN or federal ID 4d. SSN or federal I | 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
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| 36. Municipality 37. Municipality 39. State 3h. ZIP Code 19 MAXWELL STREET BATH ME 04530 4. GRANTOR/SELLER 4. Last name, first name, Mt. or business name RUMNEY, JOHN D 4c. Last name, first name, Mt. or Business name 4d. SSN or federal ID 4d. SSN | | | | | 3d. SSN or federal ID |
| 46. GRANTOR/SELLER 46. Last name, first name, Mil or business name 40. SSN or federal ID RUMNEY, JOHN D 41. Municipality 42. Last name, first name, Mil or Business name 44. SSN or federal ID 45. Last name, first name, Mil or Business name 46. Mailing address 47. Municipality 49. State 41. Municipality 49. State 41. Municipality 49. State 40. SSN or federal ID 50. SSN or federal ID 40. SSN or federal ID 4 | , | | 2f Municipality | | 2g State 2h ZID Code |
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| 4c. Last name, first name, Mt; or business name 4d. SSN or federal ID 4d. Last name, first name, Mt; or Business name 4d. SSN or federal ID 4d. Mailing address 4d. Municipality 4g. State 4d. SSN or federal ID 4d. Mailing address 4d. Municipality 4g. State 4d. SSN or federal ID 4d. Mailing address 4d. Municipality 4g. State 4d. SSN or federal ID 4d. Mailing address 4d. Municipality 4g. State 4d. SSN or federal ID 4d. Advisor federal ID 5d. Arcarrell federal ID 6d. Filt market value (Enter a value only if you entered '0' or a nominal value on line 6a) | | | DAIII | | WIE 04330 |
| Ac. Last name, first name, MIc or Business name 4c. Last name, first name, MIc or Business name 4c. Last name, first name, MIc or Business name 4d. SSN or feederal ID 4d. Mailing address 4d. Municipality 4g. State 4h. ZiP Code STANDISH ME 04084 5. PROPERTY 5a. Map Block Lot Sub-lot Check any that apply 32 No maps exist Multiple parcels 5c. Physical location 19 MAXWELL STREET 8a. Purchase price (if the transfer is a gift, enter '0') 6b. Fair market value (Enter a value only if you entered '0' or a nominal value on line 6a) 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. 7. DATE OF TRANSFER (MM-DD-YYYY) 04-29-2022 8. CLASSIFIED. WARNING TO BUYER - if the property is classified as farmland, open space, tree growth, or working waterfront, a substantial financial penality may being service or or the state of the framework of the fransfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. 10. INCOME TAX WITHHELD. The buyer is not required to withhold Maine income tax because: X Seller has qualified as a Maine resident A waiver has been received from the Stale Tax Assessor Consideration for the property is less than \$50,000 The transfer is a forecopyry is less than \$50,000 The transfer is a sell or market property experts as any knowledge and belief the information contained herein is true, correct and complete. Declaration of prepare is based on information provided by Granto(s) and Grante(s) and of which prepare has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: CARLY JOYCE Phone number: 4d. Municipality 4g. State 4h. ZiP Code on m | | | | | 4b. SSN or federal ID |
| 4e. Mailing address 22 ROSIDA DRIVE STANDISH ME 04084 5. PROPERTY 32 71 No maps exist Multiple parcels Portion of parcel Not applicable 0.11 6. TRANSFER TAX 6a. Purchase price (if the transfer is a gift, enter "0") | | | | | |
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| 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | 32 | 71 | | erty being sold (see ins | structions). |
| 6a. Purchase price (If the transfer is a gift, enter "0") | · · | | | | , |
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| the transfer that suggest the price paid was either more or less than its fair market value? If yes, check the box and enter explanation below. X Seller has qualified as a Maine resident A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: CARLY JOYCE Phone number: Mailing address: 970 BAXTER BLVD SUITE 204 Email address: carlys@tlsettlement.com Fax number: | 9 SPECIAL CIRCUMSTANCES Were there | | | <u>, </u> | he buver is not required to |
| A waiver has been received from the State Tax Assessor Consideration for the property is less than \$50,000 The transfer is a foreclosure sale 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: CARLY JOYCE Phone number: Mailing address: 970 BAXTER BLVD SUITE 204 Email address: Carlys@tlsettlement.com PORTLAND, ME 04103 Fax number: | the transfer that suggest the price paid was | either more or less than its fa | | | |
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| PREPARER. Name of preparer: CARLY JOYCE Mailing address: 970 BAXTER BLVD SUITE 204 Portland, ME 04103 Pax number: (207) 761-7277 Email address: carlys@tlsettlement.com | to the best of my knowledge and belief the ir tion provided by Grantor(s) and Grantee(s) a | formation contained herein | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| Mailing address: 970 BAXTER BLVD SUITE 204 Email address: carlys@tlsettlement.com PORTLAND, ME 04103 Fax number: | PREPARER. Name of preparer: CARLY J | OYCE | Phone number | r: (207) 761-7277 | |
| T AX Harrison. | OFO DAVIETO D | | Email address | carlys@tlsettlement. | com |
| | PORTLAND, M | E 04103 | Fax number:_ | | Doy 11/10 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 05/03/2022 |
| Time Recorded | 09:55:00 AM |
| ransfer Tax Amount | \$946.00 |
| Document Number | 2022r-03062 |
| Book | 2022 |
| Page | 3062 |
| | EGISTRY USE ONLY |

| DO NOT RE-PI | ROCESS. | Form RETTD | | Time Recorded | 09:55:00 AM |
|--|--|--|---|---|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$946.00 |
| 1. County SAGADA | НОС | | | Document Number | 2022r-03062 |
| 2. Municipality RATH | | | | Book | |
| 2. Municipality BATH | | | | Page | 3062 |
| 3. GRANTEE/PURCHASE | R | | | BOOK/PAGE - | REGISTRY USE ONLY |
| 3a. Last name, first name, MI; | | | | | 3b. SSN or federal ID |
| ALABOUDI, HEA | | | | | |
| 3c. Last name, first name, MI; | or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address after purch | nasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 25 SPRINGVIEW | LANE, UNIT | 8 | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | , | | | | |
| 4a. Last name, first name, MI; | or business name | | | | 4b. SSN or federal ID |
| SNYDER, ERIC K | | | | | |
| 4c. Last name, first name, MI; | or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 6 ASHFORD STRI | EET | | NEWTON | | NJ 07860 |
| 5. PROPERTY 5a. Map | Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - | enter the code |
| 16 | 045 | 800 | No maps exist | erty being sold (see ii | , |
| 5c. Physical location | | | Multiple parce Portion of pare | _ | d. Acreage (see instructions) |
| 25 SPRING VIEW | LANE, UNIT | 8 | Not applicable | | 0.00 |
| 6. TRANSFER TAX | , | | | | |
| 6a. P | Purchase price (If the tra | ansfer is a gift, enter "0") | | 6a. | \$215,000 |
| 6b. F | air market value (Enter | a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | ■ 00 |
| 6c. Exemption claim - Ch | neck the box if either gr | antor or grantee is claiming e | exemption from transfer to | ax and enter explanation belo | w. |
| | | | | | |
| 7. DATE OF TRANSFER (M | | | | | |
| 04-26-2022 | //M-DD-YYYY) 8. | CLASSIFIED. WARNING | TO BUYER - If the p | property is classified as fa | rmland, |
| | or | oen space, tree growth, o | r working waterfront, a | property is classified as fal a substantial financial pen | |
| 9 SPECIAL CIRCUMSTAN | or be | pen space, tree growth, or triggered by developmen | r working waterfront, ant, subdivision, partition | a substantial financial pen on, or change in use. | alty may CLASSIFIED |
| 9. SPECIAL CIRCUMSTAN the transfer that suggest th | op be | pen space, tree growth, of e triggered by development my special circumstances her more or less than its fa | r working waterfront, ant, subdivision, partition with 10. IN | a substantial financial pen on, or change in use. | CLASSIFIED The buyer is not required to |
| | op be | pen space, tree growth, of e triggered by development my special circumstances her more or less than its fa | r working waterfront, and the subdivision, partition with 10. IN air withholds | a substantial financial pen on, or change in use. COME TAX WITHHELD. old Maine income tax beca eller has qualified as a Ma | The buyer is not required to ause: |
| the transfer that suggest th | op be | pen space, tree growth, of e triggered by development my special circumstances her more or less than its fa | r working waterfront, and subdivision, partition with 10. IN air S | a substantial financial pen on, or change in use. COME TAX WITHHELD. old Maine income tax beca eller has qualified as a Ma waiver has been received | The buyer is not required to ause: aine resident If from the State Tax Assessor |
| the transfer that suggest th | op be | pen space, tree growth, of e triggered by development my special circumstances her more or less than its fa | r working waterfront, and the subdivision, partition with 10. IN air withholds A | a substantial financial pen on, or change in use. COME TAX WITHHELD. old Maine income tax beca eller has qualified as a Ma | The buyer is not required to ause: aine resident If from the State Tax Assessor arty is less than \$50,000 |
| the transfer that suggest th market value? If yes, check 11. OATH. Aware of penalti | op be NCES. Were there are e price paid was eithe the box and enter ent | pen space, tree growth, of etriggered by development by special circumstances the more or less than its freexplanation below. M.R.S. § 4641-K, I declar | r working waterfront, and subdivision, partition with 10. IN air withhold S A C T Tere that I have reviewe | a substantial financial pen on, or change in use. COME TAX WITHHELD. Illiant of the complete | The buyer is not required to ause: aine resident If from the State Tax Assessor arty is less than \$50,000 e sale ator(s) and Grantee(s) and |
| the transfer that suggest th market value? If yes, check 11. OATH. Aware of penalti to the best of my knowledge tion provided by Grantor(s) | op be NCES. Were there are price paid was eith to the box and enter of the box and enter of the sas set forth in 36 e and belief the informand Grantee(s) and | pen space, tree growth, or triggered by development of the proof of th | r working waterfront, and subdivision, partition with a 10. IN withhold air SAAACCTT | a substantial financial penton, or change in use. COME TAX WITHHELD. old Maine income tax becauler has qualified as a Mawaiver has been received onsideration for the proper the transfer is a foreclosured this return with the Grammplete. Declaration of presents on the proper than the complete of the proper than the grammplete. | The buyer is not required to ause: aine resident If from the State Tax Assessor orty is less than \$50,000 e sale ator(s) and Grantee(s) and eparer is based on informa- |
| the transfer that suggest th market value? If yes, check the suggest that the transfer that suggest the market value? If yes, check the transfer that suggest the suggest that | op be NCES. Were there are e price paid was eith at the box and enter of the box and enter of es as set forth in 36 e and belief the informand Grantee(s) and e. | pen space, tree growth, or triggered by development by special circumstances ner more or less than its freezplanation below. M.R.S. § 4641-K, I declarmation contained herein of which preparer has an | r working waterfront, and subdivision, partition with the sair withhold of the sair withhold of the sair withhold of the sair | a substantial financial penton, or change in use. COME TAX WITHHELD. old Maine income tax becaute has qualified as a Material waiver has been received consideration for the proper transfer is a foreclosured this return with the Gramplete. Declaration of prestand that the submission | The buyer is not required to ause: aine resident If from the State Tax Assessor orty is less than \$50,000 e sale ator(s) and Grantee(s) and eparer is based on informa- |
| the transfer that suggest th market value? If yes, check of the second o | op be NCES. Were there are e price paid was eith of the box and enter e es as set forth in 36 e and belief the informand Grantee(s) and e. RED DOOR | pen space, tree growth, one triggered by development of the tr | r working waterfront, ant, subdivision, partition with 10. IN air withhold S A C T I T C T I S T C T C T I S T C T I S T C T C T I S T C T C T C T C T C T C T C T C T C T | a substantial financial penton, or change in use. COME TAX WITHHELD. old Maine income tax becauteller has qualified as a Matawaiver has been received consideration for the proper the transfer is a foreclosured this return with the Gramplete. Declaration of prestand that the submission (603) 427-9399 | CLASSIFIED The buyer is not required to ause: aine resident If from the State Tax Assessor arty is less than \$50,000 e sale ator(s) and Grantee(s) and exparer is based on information an electronic form return |
| 11. OATH. Aware of penaltito the best of my knowledge tion provided by Grantor(s) constitutes a legal signature PREPARER. Name of preparations and preparations and preparations and preparations and preparations and preparations are preparations. | op be NCES. Were there are e price paid was eith at the box and enter of the box and enter of es as set forth in 36 e and belief the informand Grantee(s) and e. | pen space, tree growth, one triggered by development by special circumstances ner more or less than its freezplanation below. M.R.S. § 4641-K, I declar mation contained herein of which preparer has ar TITLE | r working waterfront, ant, subdivision, partition with 10. IN air withhold S A C T I T C T I S T C T C T I S T C T I S T C T C T I S T C T C T C T C T C T C T C T C T C T | a substantial financial penton, or change in use. COME TAX WITHHELD. old Maine income tax becaute has qualified as a Material waiver has been received consideration for the proper transfer is a foreclosured this return with the Gramplete. Declaration of prestand that the submission | CLASSIFIED The buyer is not required to ause: aine resident If from the State Tax Assessor arty is less than \$50,000 e sale ator(s) and Grantee(s) and exparer is based on information an electronic form return |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 05/03/2022 |
| Time Recorded | 02:00:00 PM |
| ansfer Tax Amount | \$1,100.00 |
| Document Number | 2022r-03068 |
| Book | 2022 |
| Page | 3068 |
| | |

| DO NOT RE-PRO | OCESS. | Do not use | | Time Recorded | ¢1 100 00 |
|--|---|--|--|--|--|
| | | Do not use | red lilk. | Transfer Tax Amount | \$1,100.00 |
| 1. County SAGADAHO | OC | | | Document Number | 2022r-03068 |
| 2. Municipality BATH | | | | Book | 2022 |
| | | | | Page | 3068 |
| GRANTEE/PURCHASER Last name, first name, MI; or I | husiness name | | | BOOK/PAGE - R | REGISTRY USE ONLY 3b. SSN or federal ID |
| WOLVEN, AMOS M | | | | | 3b. 33N of federal ID |
| 3c. Last name, first name, MI; or b | | | | | 3d. SSN or federal ID |
| | | | | | |
| 3e. Mailing address after purchasi | ing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 344 FRONT ST | | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or | business name | | | | 4b. SSN or federal ID |
| REED, TYLER | | | | | |
| 4c. Last name, first name, MI; or E | Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 131 OAK ST | | | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map | Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e | ribes the prop- |
| 26 | | 30 | No maps exis Multiple parce | t erty being sold (see ins | |
| 5c. Physical location | | | Portion of par | _ | d. Acreage (see instructions) |
| 131 OAK STREET | | | Not applicable | 9 | 0.10 |
| 6. TRANSFER TAX 6a. Puro | chase price (If the | transfer is a gift, enter "0") | | 6a. | \$250,000 .00 |
| 6b Fair | market value (En | ter a value only if you entered " | 0" or a nominal value on | line 6a) 6b | 00 |
| | · | | | , | |
| 6c. Exemption claim - Check | k the box ii either | grantor or grantee is claiming e | exemption from transfer t | ax and enter explanation belov | N. |
| | | | | | |
| 7. DATE OF TRANSFER (MM | | CLASSIFIED. WARNING open space, tree growth, or | | | altv mav |
| 05-03-2022 | | | 4 1 11 1 1 4141 | | CLASSIFIED |
| SPECIAL CIRCUMSTANCE the transfer that suggest the p | | be triggered by developme | nt, subdivision, partition | on, or change in use. | |
| market value? If yes, check the | ES. Were there | any special circumstances | with 10. IN | | The buyer is not required to use: |
| | ES. Were there price paid was e | any special circumstances ither more or less than its fa | with 10. IN air withho | COME TAX WITHHELD. T | use: |
| | ES. Were there price paid was e | any special circumstances ither more or less than its fa | with 10. IN air withho | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received | use: ine resident from the State Tax Assessor |
| | ES. Were there price paid was e | any special circumstances ither more or less than its fa | with 10. IN air withho | COME TAX WITHHELD. Told Maine income tax beca | use: ine resident from the State Tax Assessor ty is less than \$50,000 |
| 11. OATH. Aware of penalties | ES. Were there price paid was e ne box and ente | any special circumstances ither more or less than its for explanation below. | with 10. IN air withho | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received onsideration for the proper he transfer is a foreclosure | use: ine resident from the State Tax Assessor rty is less than \$50,000 |
| to the best of my knowledge a | ES. Were there price paid was end box and enter as set forth in 3 and belief the in | any special circumstances ither more or less than its for explanation below. 66 M.R.S. § 4641-K, I declar formation contained herein | with 10. IN withhous X S A C T | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received onsideration for the proper he transfer is a foreclosure d this return with the Grant amplete. Declaration of pre | ine resident from the State Tax Assessor rty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| to the best of my knowledge a tion provided by Grantor(s) an constitutes a legal signature. | ES. Were there price paid was end box and enter as set forth in 3 and belief the indid Grantee(s) and | any special circumstances either more or less than its for explanation below. 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an | with 10. IN withhous X S A C T T Tee that I have reviewee is true, correct and copy knowledge. I under | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received onsideration for the proper he transfer is a foreclosure d this return with the Grant implete. Declaration of pre- stand that the submission of | ine resident from the State Tax Assessor rty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| to the best of my knowledge a tion provided by Grantor(s) an constitutes a legal signature. PREPARER. Name of prepare | ES. Were there price paid was end box and enter as set forth in 3 and belief the industrial Grantee(s) and Tulle CR | any special circumstances either more or less than its for explanation below. 66 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an IDER | with 10. IN withhous X S A C T T Tee that I have reviewee is true, correct and control of the co | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received onsideration for the proper he transfer is a foreclosure d this return with the Grant amplete. Declaration of prestand that the submission of the complex of the submission of the complex of t | use: ine resident from the State Tax Assessor rty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- of an electronic form return |
| to the best of my knowledge a tion provided by Grantor(s) an constitutes a legal signature. PREPARER. Name of prepare Mailing address:10 V | as set forth in 3 and belief the ind Grantee(s) and Granter: JULIE CR WATER ST, 1 | any special circumstances either more or less than its for explanation below. 66 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an IDER | with 10. IN withhous X S A C T T Tee that I have reviewee is true, correct and control of the co | COME TAX WITHHELD. Told Maine income tax beca eller has qualified as a Mai waiver has been received onsideration for the proper he transfer is a foreclosure d this return with the Grant implete. Declaration of pre- stand that the submission of | use: ine resident from the State Tax Assessor rty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- of an electronic form return |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|------------------|-------------|
| Date Recorded | 05/04/2022 |
| Time Recorded | 08:48:00 AM |
| nsfer Tax Amount | \$2,472.80 |
| Document Number | 2022r-03079 |
| Book | 2022 |
| Page | 3079 |
| | |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 08:48:00 AM |
|--|---|--|----------------------------------|--|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$2,472.80 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-03079 |
| | | | | Book | 2022 |
| 2. Municipality BAT | `H | | | Page | 3079 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nam | e, MI; or business name | | | | 3b. SSN or federal ID |
| INGRAHAM, | TIMOTHY C | | | | |
| 3c. Last name, first name | | | | | 3d. SSN or federal ID |
| MEEKS, JESS | | | Of Manuscipus History | | 2 - Charles - 2 la 7 la Carda |
| 314 STEVENS | r purchasing this property | | 3f. Municipality PORTLAND | | 3g. State 3h. ZIP Code ME 04103 |
| | | | TORTLAND | | WIE 04103 |
| GRANTOR/SELLE Last name, first name | e, MI; or business name | | | | 4b. SSN or federal ID |
| BODWELL, R | • | | | | |
| 4c. Last name, first name | e MI: or Business name | | | | 4d. SSN or federal ID |
| BODWELL, S | | | | | 4d. Solv of lederal ID |
| , | | | 45 Manusiain aliku | | An Chata Ab ZID Cada |
| 4e. Mailing address 55 OCEAN DR | NE | | 4f. Municipality BRUNSWIC | K | 4g. State 4h. ZIP Code ME 04011 |
| | | 1-4 0::51-4 | | | |
| 5. PROPERTY 5a. | Map Block 20 | Lot Sub-lot 004 | Check any that ap No maps exist | number that best descr | ibes the prop- |
| 5c. Physical location | | | Multiple parce Portion of pare | | . Acreage (see instructions) |
| | IGTON STREET | | Not applicable | | 0.13 |
| 6. TRANSFER TAX | | | | | |
| | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$562,000 .00 |
| | 6b. Fair market value (E | nter a value only if you entered " | '0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer t | ax and enter explanation below | J. |
| | | | | | |
| 7. DATE OF TRANSF | ER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | • | | |
| 05-03-2022 | | open space, tree growth, o be triggered by developme | | | lty may CLASSIFIED |
| 9. SPECIAL CIRCUM | ISTANCES. Were there | e any special circumstances | with 10. IN | COME TAX WITHHELD. T | he buyer is not required to |
| | est the price paid was check the box and ento | either more or less than its f er explanation below. | | old Maine income tax becau | |
| | | | | eller has qualified as a Mai waiver has been received | ne resident from the State Tax Assessor |
| | | | | onsideration for the proper | |
| | | | Т | he transfer is a foreclosure | sale |
| to the best of my know | vledge and belief the ir tor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla nformation contained herein and of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| | preparer: MOLLY I | LITZ | Phone numbe | r: (207) 699-7500 Ext | |
| Mailing address: _ | 217 COMMERO | CIAL STREET #304 | Email address | molly@foresidetitle. | com |
| | PORTLAND, M | E 04101 | Fax number:_ | | |
| _ | | | | | Roy 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 05/04/2022 |
| Time Recorded | 11:31:00 AM |
| ansfer Tax Amount | \$1,324.40 |
| Document Number | 2022r-03097 |
| Book | 2022 |
| Page | 3097 |
| 5001//5105 | |

| DO NOT RE-PROCESS. | Form RE | | Time Recorded | 11:31:00 AM |
|--|---|--|--|--|
| | Do not use re | ed ink. | ansfer Tax Amount | \$1,324.40 |
| 1. County SAGADAHOC | | 13 | Document Number | 2022r-03097 |
| 2. Municipality BATH | | | Book | 2022 |
| · › DATH | | | Page _ | 3097 |
| 3. GRANTEE/PURCHASER | | L | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| WESTLAKE, JR., ROBERT N | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | 3 | Bf. Municipality | | 3g. State 3h. ZIP Code |
| PO BOX 733 | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | D11111 | | 1,12 |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| TUTTLE, BEVERLY E | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| to. Edit Hallo, flot Hallo, wii, or Business Hallo | | | | 4d. Solv of lederal ID |
| | | | | 4 00 4 700 0 |
| 4e. Mailing address 4 SCHOONER RIDGE, UNIT | | If. Municipality BATH | | 4g. State 4h. ZIP Code ME 04530 |
| , | | | Eh Time of property of | |
| 5. PROPERTY 5a. Map Block 38 | Lot Sub-lot 108 002 | Check any that apply No maps exist | 5b. Type of property - en number that best descri | bes the prop- |
| 36 | 100 002 | Multiple parcels | erty being sold (see inst | ructions). |
| 5c. Physical location | | Portion of parcel | | Acreage (see instructions) |
| 4 SCHOONER RIDGE, UNIT | 2 | Not applicable | | 0.00 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$301,00000 |
| 6b. Fair market value (F | nter a value only if you entered "0" | or a nominal value on line | 3a) 6h | 00 |
| | | | | ■00 |
| 6c. Exemption claim - Check the box if eithe | r grantor or grantee is claiming exe | emption from transfer tax ar | id enter explanation below | |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | | | | |
| 05-03-2022 | | | erty is classified as farm | |
| | open space, tree growth, or we be triggered by development | working waterfront, a sul | ostantial financial penal | |
| 9. SPECIAL CIRCUMSTANCES. Were there | open space, tree growth, or we be triggered by development any special circumstances w | working waterfront, a sul, subdivision, partition, cith 10. INCO | ostantial financial penal r change in use. ME TAX WITHHELD. TI | ty may CLASSIFIED ne buyer is not required to |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was market value? If yes, check the box and enterprise that the second | open space, tree growth, or we be triggered by development e any special circumstances we either more or less than its fair | working waterfront, a sul, subdivision, partition, coith 10. INCON withhold N | ostantial financial penal r change in use. ME TAX WITHHELD. TI faine income tax becau | ty may CLASSIFIED ne buyer is not required to use: |
| the transfer that suggest the price paid was | open space, tree growth, or we be triggered by development e any special circumstances we either more or less than its fair | working waterfront, a sul, subdivision, partition, cut ith 10. INCON withhold M | ostantial financial penal r change in use. ME TAX WITHHELD. TI faine income tax becau has qualified as a Mair | ty may CLASSIFIED ne buyer is not required to use: |
| the transfer that suggest the price paid was | open space, tree growth, or we be triggered by development e any special circumstances we either more or less than its fair | working waterfront, a sul, subdivision, partition, continuation, continu | ostantial financial penal or change in use. ME TAX WITHHELD. The faine income tax becautes a main fas qualified as a Main for has been received for the propertion or the propertion of the propertion or the propertion of the properties of the pro | cLASSIFIED The buyer is not required to use: The resident from the State Tax Assessor by is less than \$50,000 |
| the transfer that suggest the price paid was market value? If yes, check the box and entering the suggestion of the sugg | open space, tree growth, or we be triggered by development e any special circumstances we either more or less than its fair er explanation below. | working waterfront, a sul, subdivision, partition, continuation, continu | ostantial financial penal or change in use. ME TAX WITHHELD. To a faine income tax becauth has qualified as a Main over has been received for the propertions ansfer is a foreclosure | cLASSIFIED The buyer is not required to use: The resident From the State Tax Assessor Ty is less than \$50,000 Sale |
| the transfer that suggest the price paid was market value? If yes, check the box and entermarket value? If yes, | open space, tree growth, or we be triggered by development and special circumstances we either more or less than its fairer explanation below. 36 M.R.S. § 4641-K, I declaren formation contained herein is | working waterfront, a sul, subdivision, partition, cith 10. INCOM withhold M X Seller A waith Consistent That I have reviewed this true, correct and complete. | estantial financial penal or change in use. ME TAX WITHHELD. The state of the stat | ne buyer is not required to use: ne resident from the State Tax Assessor y is less than \$50,000 sale or(s) and Grantee(s) and harer is based on informa- |
| the transfer that suggest the price paid was market value? If yes, check the box and entermarket value? If yes, | open space, tree growth, or we be triggered by development any special circumstances we either more or less than its fair er explanation below. 36 M.R.S. § 4641-K, I declare and of which preparer has any | working waterfront, a sul, subdivision, partition, cith 10. INCOM withhold M X Seller A waith Consistent That I have reviewed this true, correct and complete. | ostantial financial penal or change in use. ME TAX WITHHELD. TI daine income tax becauth has qualified as a Mair or has been received for the propert ansfer is a foreclosure of section with the Granto etc. Declaration of prepent detat the submission of the propert of that the submission of the propert of that the submission of the propert of the propert of that the submission of prepent of the propert of th | ne buyer is not required to use: ne resident from the State Tax Assessor y is less than \$50,000 sale or(s) and Grantee(s) and harer is based on informa- |
| the transfer that suggest the price paid was market value? If yes, check the box and entermarket value? If yes, | open space, tree growth, or we be triggered by development as any special circumstances we either more or less than its fairer explanation below. 36 M.R.S. § 4641-K, I declare a formation contained herein is and of which preparer has any EA TITLE SERVICES. | working waterfront, a sul, subdivision, partition, cith 10. INCOM withhold M X Seller A waiv Consi The tr that I have reviewed thi true, correct and compleknowledge. I understan Phone number: | ostantial financial penal or change in use. ME TAX WITHHELD. TI daine income tax becauth has qualified as a Mair or has been received for the propert ansfer is a foreclosure of section with the Granto etc. Declaration of prepent detat the submission of the propert of that the submission of the propert of that the submission of the propert of the propert of that the submission of prepent of the propert of th | ty may CLASSIFIED The buyer is not required to lise: The resident From the State Tax Assessor Ty is less than \$50,000 Sale Dr(s) and Grantee(s) and lighter is based on information an electronic form return |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ir tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. PREPARER. Name of preparer: BAY ARI | open space, tree growth, or we be triggered by development any special circumstances we either more or less than its fair er explanation below. 36 M.R.S. § 4641-K, I declare and of which preparer has any special circumstances we either more or less than its fair er explanation below. | working waterfront, a sul, subdivision, partition, cith 10. INCOM withhold M X Seller A waiv Consi The tr that I have reviewed thi true, correct and compleknowledge. I understan Phone number: | ostantial financial penal or change in use. ME TAX WITHHELD. TI daine income tax becauth has qualified as a Mair or has been received for deration for the propert ansfer is a foreclosure of section with the Granto etc. Declaration of prepend that the submission of 207) 775-5900 | ty may CLASSIFIED The buyer is not required to lise: The resident From the State Tax Assessor Ty is less than \$50,000 Sale Dr(s) and Grantee(s) and lighter is based on information an electronic form return |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
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| Date Recorded | 05/05/2022 |
| Time Recorded | 01:12:00 PM |
| ansfer Tax Amount | \$1,320.00 |
| Document Number | 2022r-03147 |
| Book | 2022 |
| Page | 3147 |
| D001//D105 D | EGIOTEN/LIGE ONLY |

| DO NOT RE-PROCESS. | Form RI | | Time Recorded | 01:12:00 PM |
|---|---|-----------------------------------|--|------------------------------|
| | Do not use | red ink. | Transfer Tax Amount | \$1,320.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03147 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 3147 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| CARON, KATE MARIE | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| CARON, SARA MARIE 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 227 MIDDLE ROAD | | CUMBERLA | ND | ME 04021 |
| | | COMBERLA | | WIE 04021 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| LIGHT TOUCH DWELLINGS | S, LLC, | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| io. East hame, met hame, wii, or Basiness hame | | | | 4d. OON of federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | Ţ | 4g. State 4h. ZIP Code |
| 81 BRIDGE STREET | | YARMOUTH | | ME 04096 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot 106 | Check any that app No maps exist | number that best descri | ibes the prop- |
| 31 | 100 | Multiple parcel | erty being sold (see ins | tructions). |
| 5c. Physical location | | Portion of parc | | . Acreage (see instructions) |
| 12 WESTERN AVENUE | | Not applicable | | 0.19 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$300,000 .00 |
| Oh. Fair randust value (F | | (O)' | lin - C-) | · |
| | nter a value only if you entered ' | | | ■00 |
| 6c. Exemption claim - Check the box if either | r grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | l. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | |
| 05-05-2022 | be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | | | COME TAX WITHHELD. T | · · |
| the transfer that suggest the price paid was market value? If yes, check the box and ent | | | ld Maine income tax becau | |
| | | | eller has qualified as a Mai waiver has been received t | from the State Tax Assessor |
| | | | onsideration for the propert | * * |
| | | | ne transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the in | | | | |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | | | | |
| PREPARER. Name of preparer: MAINE 1 | TITLE SERVICES, LLC | Phone number | <u>(207) 781-7400</u> | |
| Mailing address:361 US ROUTE | | | _info@mainetitleservi | ces.com |
| FALMOUTH, N | /IE 04105 | Fax number: | | |
| | | ax number | | Day 11/10 |

PROCESSED ONLINE

DLN: _1002240192577

| Registry | SAGADAHOC |
|------------------|-------------|
| Date Recorded | 05/06/2022 |
| Time Recorded | 10:24:00 AM |
| nsfer Tax Amount | \$1,540.00 |
| Document Number | 2022r-03166 |
| Book | 2022 |
| Page | 3166 |
| | |

| DO NOT R | E-PROCESS. | Form R | ETTD | Time Recorded | 10:24:00 AM |
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| | | Do not use | red ink. | Transfer Tax Amount | \$1,540.00 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03166 |
| | | | | Book | 2022 |
| 2. Municipality BA7 | l'H | | | Page | 3166 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| · · | ne, MI; or business name | | | | 3b. SSN or federal ID |
| | TREET HOLDIN | IGS, LLC, | | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 389 WINDYW | | | BARRE | | VT 05641 |
| 4. GRANTOR/SELLE | | | | | |
| 4a. Last name, first nar | me, MI; or business name | | | | 4b. SSN or federal ID |
| FRONT STRE | EET PROPERTIE | S, LLC, | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 129 FRONT S | TREET | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot | Check any that a | | |
| | 26 | 267 00 | No maps exis | erty being sold (see ins | 2117 |
| 5c. Physical location | | | Multiple parce Portion of par | | l. Acreage (see instructions) |
| 129 FRONT S | TREET | | Not applicabl | | 0.10 |
| 6. TRANSFER TAX | 6a Purchase price (If the | transfer is a gift, enter "0") | | 6a | \$250,000 |
| | ca. r aronaso priso (ii are | vitarioror io a girt, oritor o y | | | \$350,000 |
| | 6b. Fair market value (Er | ter a value only if you entered | "0" or a nominal value or | n line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if either | grantor or grantee is claiming | exemption from transfer | tax and enter explanation below | v. |
| | | | | | |
| 7. DATE OF TRANSI | FER (MM-DD-YYYY) | | | property is classified as farr | |
| 04-29-2022 | 2 | be triggered by developme | _ | a substantial financial pena on, or change in use. | CLASSIFIED |
| | | any special circumstances | | COME TAX WITHHELD. T | |
| | gest the price paid was o , check the box and ento | either more or less than its t er explanation below. | | old Maine income tax becau Seller has qualified as a Mai | |
| | | | | | from the State Tax Assessor |
| | | | | Consideration for the proper | |
| 44 0 0 7 1 1 1 1 1 1 | | | | he transfer is a foreclosure | |
| to the best of my kno tion provided by Grar constitutes a legal sig | wledge and belief the in ntor(s) and Grantee(s) a gnature. | formation contained herein nd of which preparer has a | is true, correct and cony knowledge. I under | ed this return with the Grant omplete. Declaration of prepretation of the rstand that the submission of the submission | parer is based on informa- |
| PREPARER. Name o | f preparer: MELISSA | REYNOLDS | Phone number | er: (207) 466-9040 | |
| Mailing address: | 147 PARK STRI | EET | Email address | s: _melissa@mjreynolds | law.com |
| | ROCKLAND, M | IE 04841 | Fax number: | | |
| | | | | | Rev. 11/18 |

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| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 05/06/2022 |
| Time Recorded | 03:26:00 PM |
| ansfer Tax Amount | \$2,068.00 |
| Document Number | 2022r-03188 |
| Book | 2022 |
| Page | 3188 |
| | |

| DO NOT RE-PROCESS. | Form RI | | Time Recorded | 03:26:00 PM |
|--|------------------------------------|--------------------------------|---|----------------------------------|
| | Do not use | red ink. | Transfer Tax Amount | \$2,068.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03188 |
| 2 Municipality DATH | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 3188 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| LEIGHTON, MIKEL | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| LEIGHTON, CARISSA H | | | | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 164 HIGH STREET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | 41 0001 6 1 110 |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| KIND VENTURES, LLC, | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 9 KIMBERLY CIRCLE | | BRUNSWIC | K | ME 04011 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | | |
| 40 | 16 | No maps exist | erty being sold (see ins | |
| 5c. Physical location | | Multiple parce Portion of parc | | l. Acreage (see instructions) |
| 9 KIMBERLY CIRCLE | | Not applicable | | 0.40 |
| | | | | |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$470,000 .00 |
| 6b. Fair market value (E | nter a value only if you entered " | '0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation belov | V. |
| | | | | |
| 7 DATE OF TRANSFER (MM DD VVVVV) | 8. CLASSIFIED. WARNING | 3 TO BUYER - If the r | ronerty is classified as farr | mland |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 05-06-2022 | open space, tree growth, o | r working waterfront, a | a substantial financial pena | |
| 03-00-2022 | be triggered by developme | | · | |
| SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was | | | COME TAX WITHHELD. T old Maine income tax beca | he buyer is not required to use: |
| market value? If yes, check the box and enter | | | eller has qualified as a Mai | ne resident |
| | | | | from the State Tax Assessor |
| | | | onsideration for the proper | |
| | | | he transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ir | | | | |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | and of which preparer has ar | ny knowledge. I under | stand that the submission of | of an electronic form return |
| PREPARER. Name of preparer: LINDA D | AIGLE | Phone numbe | r: (207) 376-0634 | |
| Mailing address:11 BOWDOIN I | | | :_ldaigle@sdtitlemaine | e.com |
| TOPSHAM, ME | E 04086 | Fax number: | | |
| | | | | Dov. 11/10 |

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MAINE REAL ESTATE TRANSFER TAX DECLARATION

SAGADAHOC Registry Date Recorded 05/09/2022 01.55.00 PM

| DO NOT RE-PROCESS | S. Form R | FIID | Time Recorded | 01:55:00 PM |
|--|--|--|--|--|
| | Do not use | red ink. | Transfer Tax Amount | \$1,980.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03234 |
| 2. Municipality BATH | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 3234 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business na | ame | | | 3b. SSN or federal ID |
| TAMI J MILLER TRUST U | J/A/D APRIL 10, 2020, | | | |
| 3c. Last name, first name, MI; or business na | ame | | | 3d. SSN or federal ID |
| | | | | |
| 3e. Mailing address after purchasing this prop | perty | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 6654 HASTINGS LANE | | FRANKLIN | | TN 37069 |
| 4. GRANTOR/SELLER | | | | 4, 00), (, , , , , |
| 4a. Last name, first name, MI; or business na | ame | | | 4b. SSN or federal ID |
| HOWELL, SALLY S | | | | |
| 4c. Last name, first name, MI; or Business na | ame | | | 4d. SSN or federal ID |
| HOWELL, WILLIAM E | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 1486 WASHINGTON STRI | EET | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Bloo | ck Lot Sub-lot | Check any that app | | |
| 13 | 30 | No maps exist | number that best descr erty being sold (see ins | |
| 5c. Physical location | | Multiple parcel Portion of parc | | . Acreage (see instructions) |
| 1486 WASHINGTON STRI | EET | Not applicable | | 0.29 |
| | | | | |
| 6. TRANSFER TAX 6a. Purchase price | (If the transfer is a gift, enter "0") | | 6a. | \$450,000 .00 |
| 6b. Fair market valu | ue (Enter a value only if you entered | "0" or a nominal value on I | ine 6a) 6b. | ■ 00 |
| 6c. Exemption claim - Check the box if | either grantor or grantee is claiming | exemption from transfer ta | x and enter explanation below | <i>I</i> . |
| | 0 0 | • | | |
| | | | | |
| 7 DATE OF TRANSFER AMAIND VVV | A OLAGOIFIED MADNIN | O TO DUNED. IS | | |
| 7. DATE OF TRANSFER (MM-DD-YYY) | open space, tree growth, o | or working waterfront, a | substantial financial pena | Itv mav |
| 05-06-2022 | | or working waterfront, a ent, subdivision, partitio | substantial financial pena n, or change in use. | lty may CLASSIFIED |
| 05-06-2022 9. SPECIAL CIRCUMSTANCES. Were | open space, tree growth, obe triggered by development there any special circumstances | or working waterfront, a ent, subdivision, partitio s with 10. ING | substantial financial pena n, or change in use. COME TAX WITHHELD. T | CLASSIFIED he buyer is not required to |
| 05-06-2022 | open space, tree growth, obe triggered by development there any special circumstances was either more or less than its | or working waterfront, a ent, subdivision, partitions with 10. INC fair withho | substantial financial pena n, or change in use. COME TAX WITHHELD. T ld Maine income tax becau | CLASSIFIED he buyer is not required to use: |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid | open space, tree growth, obe triggered by development there any special circumstances was either more or less than its | or working waterfront, a cent, subdivision, partitions with 10. ING fair X Se | substantial financial pena n, or change in use. COME TAX WITHHELD. T ld Maine income tax becau eller has qualified as a Mai | CLASSIFIED he buyer is not required to use: |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid | open space, tree growth, obe triggered by development there any special circumstances was either more or less than its | or working waterfront, a ent, subdivision, partitions with 10. INC fair withho X Se A | substantial financial pena n, or change in use. COME TAX WITHHELD. T Id Maine income tax becauteller has qualified as a Mai waiver has been received insideration for the propert | ty may CLASSIFIED he buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid market value? If yes, check the box and | open space, tree growth, obe triggered by developmenthere any special circumstances was either more or less than its denter explanation below. | or working waterfront, a ent, subdivision, partitions with 10. IN fair withho X Se A Co | substantial financial pena n, or change in use. COME TAX WITHHELD. T id Maine income tax becau- eller has qualified as a Mai waiver has been received onsideration for the propert e transfer is a foreclosure | ty may CLASSIFIED he buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid | open space, tree growth, open triggered by developmenthere any special circumstances was either more or less than its denter explanation below. | or working waterfront, a ent, subdivision, partitions with fair withho X Se A Co Tr | substantial financial pena n, or change in use. COME TAX WITHHELD. T Id Maine income tax becauteller has qualified as a Mai waiver has been received insideration for the propertie transfer is a foreclosure. | he buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale or(s) and Grantee(s) and |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid market value? If yes, check the box and to the best of my knowledge and belief to the provided by Grantor(s) and Grantees. | open space, tree growth, open triggered by developmenthere any special circumstances was either more or less than its denter explanation below. th in 36 M.R.S. § 4641-K, I declarate information contained herein | or working waterfront, a ent, subdivision, partitions with the fair withhous X Se A Co The are that I have reviewed is true, correct and contents. | substantial financial pena n, or change in use. COME TAX WITHHELD. T Id Maine income tax becauteller has qualified as a Mai waiver has been received ensideration for the propertie transfer is a foreclosure. If this return with the Grant mplete. Declaration of pregions in the properties of the prope | he buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale or(s) and Grantee(s) and parer is based on informa- |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid market value? If yes, check the box and 11. OATH. Aware of penalties as set for to the best of my knowledge and belief to the provided by Grantor(s) and Grantee constitutes a legal signature. | open space, tree growth, open triggered by development there any special circumstances was either more or less than its denter explanation below. th in 36 M.R.S. § 4641-K, I declarate information contained hereingles) and of which preparer has a | or working waterfront, a ent, subdivision, partitions with the same of the sam | substantial financial pena n, or change in use. COME TAX WITHHELD. T Id Maine income tax becauteller has qualified as a Mai waiver has been received ensideration for the propertie transfer is a foreclosure. If this return with the Grant mplete. Declaration of pregions in the properties of the prope | he buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale or(s) and Grantee(s) and parer is based on informa- |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid market value? If yes, check the box and to the best of my knowledge and belief to the best of my knowledge and belief to provided by Grantor(s) and Grantee constitutes a legal signature. PREPARER. Name of preparer: JAME | open space, tree growth, open triggered by development there any special circumstances was either more or less than its denter explanation below. th in 36 M.R.S. § 4641-K, I declarate information contained hereingles) and of which preparer has a | or working waterfront, a cent, subdivision, partitions with the series water that I have reviewed its true, correct and control to the series with the series water that I have reviewed its true, correct and control the series water than the series water that the series water that the series water that the ser | substantial financial penan, or change in use. COME TAX WITHHELD. To the content of the properties of of th | the buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale or(s) and Grantee(s) and parer is based on informa- of an electronic form return |
| 9. SPECIAL CIRCUMSTANCES. Were the transfer that suggest the price paid market value? If yes, check the box and 11. OATH. Aware of penalties as set for to the best of my knowledge and belief tion provided by Grantor(s) and Grantee constitutes a legal signature. PREPARER. Name of preparer: Mailing address: 6 CITY CEN | open space, tree growth, open triggered by development there any special circumstances was either more or less than its denter explanation below. th in 36 M.R.S. § 4641-K, I declarate information contained hereingle(s) and of which preparer has a destruction of the second s | or working waterfront, a cent, subdivision, partitions with the series water that I have reviewed its true, correct and control to the series with the series water that I have reviewed its true, correct and control the series water than the series water that the series water that the series water that the ser | substantial financial penan, or change in use. COME TAX WITHHELD. T Id Maine income tax becauteller has qualified as a Maine waiver has been received tonsideration for the propertie transfer is a foreclosure of this return with the Grant mplete. Declaration of preparation that the submission of the properties of the | the buyer is not required to use: ne resident from the State Tax Assessor ty is less than \$50,000 sale or(s) and Grantee(s) and parer is based on informa- of an electronic form return |

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| Registry | SAGADAHOC |
|-------------------|-------------------|
| Date Recorded | 05/13/2022 |
| Time Recorded | 02:40:00 PM |
| ansfer Tax Amount | \$1,606.00 |
| Document Number | 2022r-03361 |
| Book | 2022 |
| Page | 3361 |
| POOK/DACE D | ECISTRY LISE ONLY |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 02:40:00 PM |
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| | | Do not use | red ink. | Transfer Tax Amount | \$1,606.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-03361 |
| 2 Municipality DAT | TT T | | | Book | 2022 |
| 2. Municipality BAT | Н | | | Page | 3361 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | ne, MI; or business name | | | | 3b. SSN or federal ID |
| JENKINS, BR | | | | | |
| , | e, MI; or business name | | | | 3d. SSN or federal ID |
| CROFT, ANN | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 34 WEEKS ST | | | BATH | | ME 04530 |
| | | | DAIII | | WIE 04330 |
| GRANTOR/SELLE Last name, first name | ne, MI; or business name | | | | 4b. SSN or federal ID |
| SULLIVAN, M | | | | | |
| 4c. Last name, first name | | | | | 4d, CCN or fodoral ID |
| GAGNON, BR | | | | | 4d. SSN or federal ID |
| · | COCL | | | | |
| 4e. Mailing address | | | 4f. Municipality | ., | 4g. State 4h. ZIP Code |
| PO BOX 652 | | | BRUNSWIC | | ME 04011 |
| 5. PROPERTY 5a. | Map Block 33 | Lot Sub-lot 57 | Check any that ap No maps exist Multiple parce | number that best descri erty being sold (see ins | ibes the prop- |
| 5c. Physical location | | | Portion of pare | | . Acreage (see instructions) |
| 34 WEEKS ST | REET | | Not applicable | • | 0.12 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$365,000 |
| | 6b Fair market value (F | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6h | 00 |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | |
| | | | | | |
| 7. DATE OF TRANSF 05-13-2022 | | 8. CLASSIFIED. WARNING open space, tree growth, or be triggered by development | r working waterfront, a | a substantial financial pena | |
| the transfer that sugg | est the price paid was | e any special circumstances either more or less than its f | with 10. IN air withho | COME TAX WITHHELD. Told Maine income tax becau | |
| market value? If yes, | check the box and ent | er explanation below. | | eller has qualified as a Mai | |
| | | | | onsideration for the propert | from the State Tax Assessor ty is less than \$50,000 |
| | | | | he transfer is a foreclosure | |
| to the best of my know tion provided by Gran constitutes a legal sig | wledge and belief the ir itor(s) and Grantee(s) a inature. | 36 M.R.S. § 4641-K, I declan formation contained herein and of which preparer has ar | is true, correct and co ny knowledge. I under | emplete. Declaration of prep stand that the submission o | parer is based on informa- |
| PREPARER. Name of | preparer: CARLY J | OYCE | Phone numbe | r: (207) 761-7277 | |
| Mailing address: _ | 970 BAXTER B | LVD SUITE 204 | Email address | carlys@tlsettlement.c | com |
| _ | PORTLAND, M | IE 04103 | Fax number:_ | | Rev. 11/18 |
| | | | | | RAV 11/18 |

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| Registry | SAGADAHOC |
|--------------------|-------------------|
| Date Recorded | 05/16/2022 |
| Time Recorded | 03:22:00 PM |
| ransfer Tax Amount | \$2,972.20 |
| Document Number | 2022r-03402 |
| Book | 2022 |
| Page | 3402 |
| BOOK/DACE B | ECISTRY LISE ONLY |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 03:22:00 PM |
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| | | Do not use | red ink. | Transfer Tax Amount | \$2,972.20 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03402 |
| | | | | Book | 2022 |
| 2. Municipality BAT | ГН | | | Page | 3402 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | me, MI; or business name | | | | 3b. SSN or federal ID |
| BATH HOUS | ING DEVELOPN | MENT CORPORAT | ION, | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN or federal ID |
| 20 Mailing address offs | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 80 CONGRES | | | BATH | | ME 04530 |
| | | | DAIII | | WIE 04330 |
| 4. GRANTOR/SELLE | =R me, MI; or business name | | | | 4b. SSN or federal ID |
| | WS GROUP, LL | C, | | | |
| | ne, MI; or Business name | , | | | Ad CCN or fodoral ID |
| 40. Last Harrie, mist harr | ile, IVII, OI DUSIIIESS Hame | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | COC ANIENHIE | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 150 CONGRE | SS AVENUE | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot | Check any that ap No maps exis | number that best descr | ribes the prop- |
| | 24 | | Multiple parce | erty being sold (see ins | structions). |
| 5c. Physical location | | | Portion of par | | I. Acreage (see instructions) |
| 150 CONGRE | SS AVENUE | | Not applicabl | e | 3.22 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | transfer is a gift, enter "0") | | 6а. | \$675,452 .00 |
| | | | | | |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | |
| | | | | | |
| | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | ltv mav |
| 05-16-2022 | 2 | be triggered by developme | nt, subdivision, partiti | on, or change in use. | CLASSIFIED |
| | | any special circumstances either more or less than its f | | NCOME TAX WITHHELD. To old Maine income tax because. | |
| | , check the box and ente | | un | Seller has qualified as a Mai | |
| | | | | | from the State Tax Assessor |
| | | | | Consideration for the proper The transfer is a foreclosure | • |
| 11 OATH Aware of r | nenalties as set forth in | 36 M.R.S. § 4641-K, I decla | | | |
| to the best of my kno | wledge and belief the in | formation contained herein nd of which preparer has ar | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| constitutes a legal sig | gnature. | • • | | | |
| | f preparer: CURTIS | | | er: (207) 774-9000 | |
| Mailing address: | | LAZA - 10TH FLOOR | Email addres | s: info@curtisthaxter.c | om |
| | PORTLAND, M | E 04101 | Fax number: | | Rev. 11/18 |
| | | | | | 1 NG V. 1 1/1 O |

PROCESSED ONLINE

DLN: _1002240192656

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC Date Recorded 05/17/2022

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 09:57:00 |) AM |
|---|--------------------------------------|---|--------------------------|--|------------------|----------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGA | ADAHOC | | | Document Number | _2022r-0 | 3408 |
| | | | | Book | 2022 | |
| 2. Municipality BA7 | l'H | | | Page | 3408 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - F | REGISTRY US | E ONLY |
| | me, MI; or business name | | | | 3b. SSN o | or federal ID |
| A NEW LIFE, | • | | | | | |
| 3c. Last name, first nan | ne, MI; or business name | | | | 3d. SSN o | r federal ID |
| 3o Mailing address after | er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 12 MCCOBB | | | DRESDEN | | ME | 04342 |
| 4. GRANTOR/SELLE | | | DRESDEIV | | IVIL | 04342 |
| | me, MI; or business name | | | | 4b. SSN o | r federal ID |
| MAZONE, FR | RANK ZACH, II | M. | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN o | r federal ID |
| MAZONE, KI | | | | | 14, 55, 75 | 1000101112 |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 12 MCCOBB | RD | | DRESDEN | | ME | 04342 |
| | . Map Block | Lot Sub-lot | Check any that ap | pply 5b. Type of property - | | 0.13.12 |
| O. TINOT ENTITIES | 26 | 194 | No maps exis | number that best desc erty being sold (see in | cribes the prop- | 306 |
| 5c. Physical location | | | Portion of par | _ | d. Acreage (see | instructions) |
| 1 NORTH ST | | | Not applicable | e | 0.36 | |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$0 | ■00 |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. \$641,600 | | | | | .00 | |
| 6c. Exemption claim - X Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | | |
| | | usal transfer to wife's | | | | |
| | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | alty may | |
| 05-11-2022 | 2 | be triggered by developme | nt, subdivision, partiti | on, or change in use. | | CLASSIFIED |
| | | e any special circumstances either more or less than its f | 144.1 | ICOME TAX WITHHELD. Toold Maine income tax beca | • | ot required to |
| 0, | , check the box and ent | | | Seller has qualified as a Ma | aine resident | |
| | | | | waiver has been received | | |
| | | | | Consideration for the prope The transfer is a foreclosure | • | \$50,000 |
| · · | | 36 M.R.S. § 4641-K, I decla formation contained herein | | | ` ' | ` ' |
| tion provided by Gran constitutes a legal sig | ntor(s) and Grantee(s) a gnature. | and of which preparer has ar | ny knowledge. I under | rstand that the submission | | |
| PREPARER. Name o | of preparer: JULIE CH | RIDER | Phone number | er: (207) 563-8104 | | |
| Mailing address: | 10 WATER ST, | PO BOX 760 | Email address | s: juliec@robgregory.o | com | |
| | DAMARISCOT | TA, ME 04543 | Fax number:_ | | | . 11/18 |
| | | | | | | |

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| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 05/19/2022 |
| Time Recorded | 03:22:00 PM |
| ansfer Tax Amount | \$1,100.00 |
| Document Number | 2022r-03460 |
| Book | 2022 |
| Page | 3460 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form RETTD | | Time Recorded | 03:22:00 PM | |
|---|-----------------------------|---|--------------------------------|--|-------------------------------|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$1,100.00 | |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03460 | |
| 2. Municipality RA7 | PT T | | | Book | 2022 | |
| 2. Municipality BA | LH | | | Page | 3460 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY | |
| | me, MI; or business name | | | | 3b. SSN or federal ID | |
| WILLIAMS, I | | | | | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN or federal ID | |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code | |
| 38 FARRIN S | | | BATH | | ME 04530 | |
| 4. GRANTOR/SELLE | | | 21111 | | 1.12 | |
| | me, MI; or business name | | | | 4b. SSN or federal ID | |
| CRYSTAL KI | EITH, PR OF ES | TATE OF CYNTHIA | A L. KELLEY, | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID | |
| , | ,, | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 41 WEBSTER | ROAD | | FREEPORT | | ME 04032 | |
| | . Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e | | |
| J. I NOI EIVI Ja | 20 | 170 | No maps exis | number that best descr | ibes the prop- | |
| 5c. Physical location | | | Multiple parce | | l. Acreage (see instructions) | |
| 1167 HIGH ST | TREET | | Portion of par Not applicable | | 0.00 | |
| | | | | | 0.00 | |
| 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | | | | \$250,000 .00 | | |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | | |
| | | | | | | |
| 7. DATE OF TRANS | EED (MM DD VVVV) | 8. CLASSIFIED. WARNING | G TO BUYER - If the r | property is classified as farr | mland. | |
| 05-19-2022 | | open space, tree growth, o be triggered by developme | r working waterfront, | a substantial financial pena | | |
| | | e any special circumstances | | COME TAX WITHHELD. T | he huver is not required to | |
| the transfer that sugg | gest the price paid was | either more or less than its f | | old Maine income tax becar | • | |
| market value? If yes | , check the box and ent | er explanation below. | | eller has qualified as a Mai | | |
| | | | | waiver has been received onsideration for the proper | from the State Tax Assessor | |
| | | | | he transfer is a foreclosure | | |
| to the best of my know | wledge and belief the ir | 36 M.R.S. § 4641-K, I decla formation contained herein and of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- | |
| constitutes a legal sig | gnature. | | | | Section 10 miles | |
| | f preparer: ELIZABE | | | r: (603) 570-6775 | | |
| Mailing address: | 11 BOWDOIN I | | Email address | Liz.Wakely@stewar | t.com | |
| | TOPSHAM, ME | 04086 | Fax number:_ | | Ray 11/18 | |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|------------------|--------------------|
| Date Recorded | 05/20/2022 |
| Time Recorded | 02:40:00 PM |
| nsfer Tax Amount | \$1,751.20 |
| Document Number | 2022r-03499 |
| Book | 2022 |
| Page | 3499 |
| | ECICEDY/LIGE CAULY |

| DO NOT R | RE-PROCESS. | Form RETTD | | Time Recorded | The state of the s | |
|---|---|--|---|--|--|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$1,751.20 | |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03499 | |
| 2 Municipality DAE | DI I | | | Book | 2022 | |
| 2. Municipality BAT | I'H | | | Page | 3499 | |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - R | REGISTRY USE ONLY | |
| 3a. Last name, first nar | me, MI; or business name | | | | 3b. SSN or federal ID | |
| | ALEXANDER JO | OSEPH | | | | |
| , | me, MI; or business name | | | | 3d. SSN or federal ID | |
| , | JAMIE BERRY er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code | |
| 504 MIDDLE | | | BATH | | ME 04530 | |
| | | | DAIII | | WIE 04330 | |
| 4. GRANTOR/SELLE 4a. Last name, first name | me, MI; or business name | | | | 4b. SSN or federal ID | |
| RAILTON, V | | | | | | |
| | | | | | 4d CCN or fodorol ID | |
| 40. Last Hame, mst Ham | ne, MI; or Business name | | | | 4d. SSN or federal ID | |
| | | | | | | |
| 4e. Mailing address | TED DO A D | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 68 BACK RIV | | | DOVER | | NH 03820 | |
| 5. PROPERTY 5a | a. Map Block | Lot Sub-lot | Check any that ap No maps exis | number that best descr | ribes the prop- | |
| | 32 | 15 | Multiple parce | erty being sold (see ins | structions). | |
| 5c. Physical location | | | Portion of par | | d. Acreage (see instructions) | |
| 504 MIDDLE | STREET | | Not applicabl | e | 0.26 | |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$398,00000 | |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | .00 | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | | |
| · | | | • | · | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | | | property is classified as farr | | |
| 05-20-2022 | 2 | open space, tree growth, o be triggered by developme | | a substantial financial pena ion, or change in use. | CLASSIFIED | |
| | | any special circumstances | | NCOME TAX WITHHELD. T | | |
| | gest the price paid was | either more or less than its f er explanation below. | | old Maine income tax becar Seller has qualified as a Mai | | |
| | | | | | from the State Tax Assessor | |
| | | | | Consideration for the proper | | |
| 44 00711 | | | | The transfer is a foreclosure | | |
| to the best of my kno tion provided by Gra | | 00145000404444 | | | | |
| constitutes a legal si | owledge and belief the in ntor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla iformation contained herein ind of which preparer has ar | is true, correct and co | omplete. Declaration of prep | parer is based on informa- | |
| | owledge and belief the in ntor(s) and Grantee(s) a | formation contained herein and of which preparer has ar | is true, correct and co y knowledge. I under | omplete. Declaration of prep | parer is based on informa- | |
| | owledge and belief the ir ntor(s) and Grantee(s) a gnature. of preparer: CARLY J | formation contained herein and of which preparer has ar | is true, correct and copy knowledge. I under | omplete. Declaration of prepretand that the submission of | parer is based on informa- of an electronic form return | |
| PREPARER. Name of | owledge and belief the ir ntor(s) and Grantee(s) a gnature. of preparer: CARLY J | offormation contained herein and of which preparer has an oyce OYCE LVD SUITE 204 | is true, correct and copy knowledge. I under | omplete. Declaration of prepretand that the submission of the submission of the control of the c | parer is based on informa- of an electronic form return | |

MAINE REVENUE SERVICES SUPPLEMENT TO THE REAL ESTATE TRANSFER TAX FORM

This form is to be used in conjunction with the Real Estate Transfer Tax Form and provides additional information when necessary.

Please attach this form to the original transfer tax form before submitting to the County Registry of Deeds.

Use additional forms as necessary.

If you have any questions, please contact the property Tax Division at 207-287-2013 or e-mail: prop.tax@maine.gov.

| Additional Grantees/Purchasers – Last Name First | | Social Secu | irity or Fed | 1. ID # |
|--|--------|-------------|--------------|---------|
| 1. dafni, jacob brian | | | | |
| 2. dafni, caitlin bourassa | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| Additional Grantors/Sellers – Last Name First | | Social Secu | ırity or Fed | . ID # |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. _ | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| | | | | |
| Additional Municipalities | Map—Bl | ock—Lot—Su | ıb-Lot | |
| 1. | | - | - | - |
| 2. | | - | - | - |
| 3. | | - | - | - |
| 4. | | - | - | - |
| 5. | | _ | _ | - |
| 6. | | _ | _ | _ |
| 7. | | _ | - | - |

8.

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| Registry | SAGADAHOC |
|---------------------|------------------|
| Date Recorded | 05/20/2022 |
| Time Recorded | 03:28:00 PM |
| Transfer Tax Amount | \$704.00 |
| Document Number | 2022r-03503 |
| Book | 2022 |
| Page | 3503 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 03:28:00 PM | |
|--|--|----------------------------------|--|------------------------------|----|
| | Do not use red ink. | | Transfer Tax Amount | \$704.00 | |
| 1. County SAGADAHOC | | | Document Number | 2022r-03503 | |
| 2. Municipality RATH | | | Book | 2022 | |
| 2. Municipality BATH | | | Page | 3503 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY | |
| 3a. Last name, first name, MI; or business name | _ | | | 3b. SSN or federal ID | |
| MAXWELL PROPERTIES, LI | LC, | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code | |
| 37 CASH STREET | | SOUTH POR | TLAND | ME 04106 | |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID | |
| UITTI, DAVID C. | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID | |
| UITTI, SUSAN T. | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 182 KING CAESAR ROAD | | DUXBURY | | MA 02332 | |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that app | | | |
| 25 | 289 | No maps exist | erty being sold (see ins | | |
| 5c. Physical location | | Multiple parcel Portion of parce | | . Acreage (see instructions) | |
| 95 LINCOLN STREET | | Not applicable | | 0.00 | |
| 6. TRANSFER TAX | | | 0- | #1.50.000 | |
| 6a. Purchase price (If the transfer is a gift, enter "0") | | | | | 0 |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | |
| | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | | | |
| 05-20-2022 | open space, tree growth, o be triggered by developme | | | Ity may CLASSIFIED |) |
| 9. SPECIAL CIRCUMSTANCES. Were there | | | COME TAX WITHHELD. T | |) |
| the transfer that suggest the price paid was a market value? If yes, check the box and enter | | | old Maine income tax becau | | |
| | | | eller has qualified as a Mai waiver has been received | | or |
| | | Co | onsideration for the proper | ty is less than \$50,000 | |
| | | | ne transfer is a foreclosure | | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ir tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | formation contained herein | is true, correct and co | mplete. Declaration of prep | parer is based on informa- | |
| PREPARER. Name of preparer: PHENIX | ΓΙΤLE SERVICES, LLC | Phone number | (207) 774-0434 | | |
| Mailing address:119 MIDDLE ST | | | grondin@phenixtitle | e.com | |
| PORTLAND, M | E 04101 | Fax number:_ | | | |
| | | | | Day 11/10 | _ |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|---------------------|------------------|
| Date Recorded | 05/23/2022 |
| Time Recorded | 12:00:00 PM |
| Transfer Tax Amount | \$950.40 |
| Document Number | 2022r-03545 |
| Book | 2022 |
| Page | 3545 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form RETTD | | Time Recorded 12:00:00 PM | |
|---|--|---|-------------------------|--|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$950.40 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03545 | |
| 2 Municipality DAT | T T | | | Book | 2022 |
| 2. Municipality BAT | Н | | | Page | 3545 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | ne, MI; or business name | | | | 3b. SSN or federal ID |
| DEMOND, A. | | | | | |
| 3c. Last name, first nam | e, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address afte | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 15 CLUF BAY | | | BRUNSWICI | K | ME 04011 |
| 4. GRANTOR/SELLE | | | | | |
| 4a. Last name, first nam | ne, MI; or business name | | | | 4b. SSN or federal ID |
| MOORE, JOS | ΙA | | | | |
| 4c. Last name, first nam | e, MI; or Business name | | | | 4d. SSN or federal ID |
| WOOD, EMIL | Y W | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 19 SCHOOL S | ST | | VERONA ISI | LAND | ME 04416 |
| | Map Block | Lot Sub-lot | Check any that app | | |
| | 31 | 50 | No maps exist | number that best descr erty being sold (see ins | |
| 5c. Physical location | | | Multiple parcel | | . Acreage (see instructions) |
| | | | Not applicable | | 0.00 |
| 6. TRANSFER TAX | | | | | |
| 6a. Purchase price (If the transfer is a gift, enter "0") | | | | | |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | |
| | | | | | |
| 7. DATE OF TRANSF | FER (MM-DD-VVVV) | 8. CLASSIFIED. WARNING | G TO BUYER - If the p | roperty is classified as farn | mland. |
| 05-23-2022 | | open space, tree growth, o be triggered by developme | r working waterfront, a | a substantial financial pena | |
| 9 SPECIAL CIRCUM | ISTANCES Were there | e any special circumstances | | COME TAX WITHHELD. T | he buver is not required to |
| the transfer that sugg | est the price paid was | either more or less than its f | air withho | old Maine income tax becau | |
| market value? If yes, check the box and enter explanation below. | | | | eller has qualified as a Mai | ne resident from the State Tax Assessor |
| | | | | onsideration for the proper | |
| | | | | ne transfer is a foreclosure | |
| to the best of my know tion provided by Gran | wledge and belief the ir itor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla formation contained herein and of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| constitutes a legal sig PREPARER. Name of | preparer: AJ DOWI | LING | Phone number | r: (207) 333-3626 | |
| Mailing address: | 222364777677 | | | : aj@treworgy-baldaco | ci.com |
| | AUBURN, ME | 04210 | Fax number: | | |
| - | | | rax number | | Rev 11/18 |

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| Registry | SAGADAHOC |
|--------------------|------------------|
| Registry | БПОПВППОС |
| Date Recorded | 05/23/2022 |
| Time Recorded | 02:30:00 PM |
| ransfer Tax Amount | \$0.00 |
| Document Number | 2022r-03554 |
| Book | 2022 |
| Page | 3554 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| | RE-PROCESS. | Form RETTD Do not use red ink. | | Time Recorded | 02:30:0 | 0 PM |
|--|-----------------------------|---|--------------------------|---|------------------|----------------|
| | | | | Transfer Tax Amoun | \$0.00 | |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-0 | 3554 |
| | | | | Book | 2022 | |
| 2. Municipality BA | ГН | | | Page | 3554 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - | REGISTRY U | SE ONLY |
| | me, MI; or business name | | | | 3b. SSN | or federal ID |
| CSP PROPER | | | | | | |
| 3c. Last name, first nar | me, MI; or business name | | | | 3d. SSN o | or federal ID |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 6 KNIGHT H | | | FALMOUTH | ł | ME | 04105 |
| 4. GRANTOR/SELLI | | | 111221110 0 11 | - | 1,122 | 0.100 |
| | me, MI; or business name | | | | 4b. SSN o | or federal ID |
| PIASECKI, P. | AUL C | | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN o | or federal ID |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 6 KNIGHT H | ILL ROAD | | FALMOUTH | | ME | 04105 |
| | n. Map Block | Lot Sub-lot | Check any that ap | | | 04103 |
| 5. PROPERTY 5a | 32 94 | 2 | No maps exis | number that best des erty being sold (see | cribes the prop- | 202 |
| 5c. Physical location | | | Portion of pa | | 5d. Acreage (see | instructions) |
| 607 MIDDLE | STREET | | Not applicabl | e | 0.70 | |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$0 | ₌00 |
| | 6b. Fair market value (E | inter a value only if you entered " | 0" or a nominal value or | n line 6a) 6b. | \$312,50 | 0 .00 |
| 6c. Exemption claim - X Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | | |
| | | sole member of LLC | | | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | | | |
| 05-23-2022 | 2 | open space, tree growth, or be triggered by developmen | • | • | nalty may | CLASSIFIED |
| | | e any special circumstances either more or less than its fa | | NCOME TAX WITHHELD. | • | ot required to |
| | | er explanation below. X | | Seller has qualified as a M | aine resident | |
| D 16 | . 1 | 1 1 6116 | | waiver has been receive | | |
| Deed for no co | onsideration from | sole member of LLC | | Idnsideration for the prop The transfer is a foreclosu | - | n \$50,000 |
| 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantee(s) and to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on information provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic form return constitutes a legal signature. PREPARER. Name of preparer: BARNS GREENFIELD & THORNTON PLUC number: (207) 781-7677 | | | | | | |
| | | | | | | |
| Mailing address: | | | Email addres | s: _ jspaulding@bgt-la | w.com | |
| | FALMOUTH, N | /IE 04105 | Fax number: | | | . 11/10 |

PROCESSED ONLINE.

| Registry | SAGADAHOC | |
|-------------------------------|-------------|--|
| Date Recorded | 05/23/2022 | |
| Time Recorded | 02:30:00 PM | |
| Transfer Tax Amount | \$0.00 | |
| Document Number | 2022r-03555 | |
| Book | 2022 | |
| Page | 3555 | |
| BOOK/PAGE - REGISTRY USE ONLY | | |

| DO NOT R | RE-PROCESS. | Form RI | ETTD | Time Recorded | 02:30:00 |) PM |
|---|--|---|--|--|--|---|
| | | Do not use | red ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-0 | 3555 |
| 2 Municipality DAE | TY | | | Book | 2022 | |
| 2. Municipality BA | I'H | | | Page | 3555 | |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - I | REGISTRY US | E ONLY |
| 3a. Last name, first nar | me, MI; or business name | | | | 3b. SSN c | r federal ID |
| CSP PROPER | RTIES LLC, | | | | | |
| 3c. Last name, first nar | me, MI; or business name | | | | 3d. SSN o | r federal ID |
| 3e Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 6 KNIGHT HI | | | FALMOUTH | | ME | 04105 |
| 4. GRANTOR/SELLE | | | TALMOUTI | | IVIL | 04103 |
| | me, MI; or business name | | | | 4b. SSN or | federal ID |
| PIASECKI, PA | | | | | | |
| 4c. Last name, first nan | me, MI; or Business name | | | | 4d. SSN or | federal ID |
| , | ,, | | | | 10, 55, 75, | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 6 KNIGHT HI | ILL ROAD | | FALMOUTH | | ME | 04105 |
| | a. Map Block | Lot Sub-lot | Check any that ap | | | 0.1102 |
| J. I INOI LINIT | 32 | 106 | No maps exist Multiple parce | number that best desc erty being sold (see in | cribes the prop- | 202 |
| | | | Multiple parce | 15 | | |
| 5c. Physical location | | | Portion of pare | _ | d. Acreage (see | instructions) |
| 5c. Physical location 608 MIDDLE | STREET | | Portion of pare | cel 5 | d. Acreage (see 0.62 | instructions) |
| 608 MIDDLE | | | Not applicable | cel 5 | 0.62 | |
| | | e transfer is a gift, enter "0") | Not applicable | cel 5 | | instructions) |
| 608 MIDDLE | 6a. Purchase price (If the | e transfer is a gift, enter "0") | Not applicable | cel 5 | 0.62 | ₌00 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | | Not applicable | cel 5 | \$0 \$178,400 | ₌00 |
| 608 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - | 6a. Purchase price (If the 6b. Fair market value (Example X) Check the box if eithe | nter a value only if you entered ' | Not applicable '0" or a nominal value on exemption from transfer to | cel 5 | \$0 \$178,400 | ₌00 |
| 60. TRANSFER TAX 6c. Exemption claim - Deed for no co | 6a. Purchase price (If the 6b. Fair market value (Example X) Check the box if eithe | r grantor or grantee is claiming of sole member of LLC 8. CLASSIFIED. WARNING | Not applicable '0" or a nominal value on exemption from transfer to the same LL G TO BUYER - If the p | cel 5 | 0.62 \$0 \$178,400 w. | ₌00 |
| 60. TRANSFER TAX 6c. Exemption claim - Deed for no co | 6a. Purchase price (If the 6b. Fair market value (Ei X Check the box if eithe onsideration from FER (MM-DD-YYYY) | r grantor or grantee is claiming a sole member of LLC | Not applicable '0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the part working waterfront, a | cel 5 | 0.62 \$0 \$178,400 w. | ₌00 |
| 608 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if eithe onsideration from FER (MM-DD-YYYY) | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the part working waterfront, and, subdivision, partition with 10. IN | cel 5 | \$0.62 \$178,400 w. | .00 .00 |
| 608 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that suggestions are suggested. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from EFER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the pur working waterfront, aunt, subdivision, partition with 10. IN fair withhom. | cel 5 dine 6a) | \$0 \$178,400 w. | .00 .00 |
| 608 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that suggestions are suggested. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from EFER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances either more or less than its f | Not applicable "0" or a nominal value on exemption from transfer to the same LL GTO BUYER - If the pur working waterfront, aunt, subdivision, partition with 10. IN fair withhom X | cel 5 | \$0.62 \$0 \$178,400 w. | .00 .00 CLASSIFIED of required to |
| 60.8 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIt the transfer that sugarraket value? If yes | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was so, check the box and enter the factor of the facto | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances either more or less than its f | Not applicable "0" or a nominal value on exemption from transfer to the same LL G TO BUYER - If the part working waterfront, a cont, subdivision, partition with 10. IN fair withhold X Solution A C to the same LL C to the same LL | cel 5 cel 5 cel 5 cel 5 cel 5 cel 5 cel 6 cel 6 cel 7 cel 7 cel 7 cel 7 cel 8 ce | \$0.62 \$178,400 w. The buyer is not ause: sine resident I from the State rty is less than | LOO CLASSIFIED ot required to |
| 60.8 MIDDLE 6. TRANSFER TAX 6c. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIt the transfer that sugmarket value? If yes Deed for no co | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was an onsideration from consideration from consideration from | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme er any special circumstances either more or less than its fer explanation below. X | Not applicable "0" or a nominal value on exemption from transfer to the same LI. G TO BUYER - If the pur working waterfront, and, subdivision, partition with 10. IN rair with a control of the same LI. X Some A | line 6a) | \$0.62 \$178,400 w. The buyer is not ause: aine resident from the State rty is less than | CLASSIFIED ot required to e Tax Assessor \$50,000 |
| 60. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that sugmarket value? If yes Deed for no co 11. OATH. Aware of to the best of my knot tion provided by Graconstitutes a legal signars. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either onsideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was a check the box and enteronsideration from penalties as set forth in owledge and belief the irrutor(s) and Grantee(s) a ignature. | sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, open space, tree growth, open special circumstances either more or less than its fer explanation below. X sole member of LLC 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the par working waterfront, and, subdivision, partition with 10. IN withhold in with air withhold X S A C to the same L4 To the sam | ine 6a) | \$0.62 \$178,400 w. The buyer is not ause: sine resident from the State rty is less than a sparer is based | CLASSIFIED of required to e Tax Assessor \$50,000 |
| 60. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that sugmarket value? If yes Deed for no co 11. OATH. Aware of to the best of my knot tion provided by Graconstitutes a legal signars. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either onsideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was a check the box and enteronsideration from penalties as set forth in owledge and belief the irrutor(s) and Grantee(s) a ignature. | r grantor or grantee is claiming of sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances either more or less than its fer explanation below. X sole member of LLC 36 M.R.S. § 4641-K, I declar formation contained herein | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the par working waterfront, and, subdivision, partition with 10. IN withhold in with air withhold X S A C to the same L4 To the sam | ine 6a) | \$0.62 \$178,400 w. The buyer is not ause: sine resident from the State rty is less than a sparer is based | CLASSIFIED of required to e Tax Assessor \$50,000 |
| 60. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that sugmarket value? If yes Deed for no co 11. OATH. Aware of to the best of my knot tion provided by Graconstitutes a legal signars. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was an onsideration from consideration from penalties as set forth in bulledge and belief the interest of preparer: BARNS Consideration from the penalties as set forth in control of preparer: | r grantor or grantee is claiming of sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances either more or less than its fer explanation below. X sole member of LLC 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an GREENFIELD & THOR | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the part working waterfront, and, subdivision, partition with 10. IN with air without X Solution A C to the same Lt To t | ine 6a) | \$0.62 \$178,400 w. The buyer is not ause: sine resident from the State rty is less than the sale stor(s) and Gra | CLASSIFIED of required to e Tax Assessor \$50,000 |
| 60. Exemption claim - Deed for no co 7. DATE OF TRANS 05-23-2022 9. SPECIAL CIRCUIT the transfer that sugmarket value? If yes Deed for no co 11. OATH. Aware of to the best of my knotion provided by Graconstitutes a legal signer. | 6a. Purchase price (If the 6b. Fair market value (En X Check the box if either consideration from FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was an onsideration from consideration from penalties as set forth in bulledge and belief the interest of preparer: BARNS Consideration from the penalties as set forth in control of preparer: | r grantor or grantee is claiming or sole member of LLC 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme any special circumstances either more or less than its fer explanation below. X sole member of LLC 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an GREENFIELD & THOR | Not applicable "0" or a nominal value on exemption from transfer to to the same LL G TO BUYER - If the part working waterfront, and, subdivision, partition with 10. IN with air without X Solution A C to the same Lt To t | line 6a) | \$0.62 \$178,400 w. The buyer is not ause: sine resident from the State rty is less than a sale stor(s) and Gra eparer is based of an electronic | CLASSIFIED of required to e Tax Assessor \$50,000 |

MAINE REAL ESTATE TRANSFER TAX DECLARATION

SAGADAHOC Registry 05/24/2022 Date Recorded

Rev. 11/18

| DO NOT RE-PROCESS. | Form RI | ETTD | Time Recorded | 10:35:00 AM | | |
|--|--|--------------------------------|--|-----------------|----------------|--|
| Do nor italiano. | Do not use red ink. | | Transfer Tax Amount | \$366.50 | | |
| 1. County SAGADAHOC | | | Document Number | 2022r-0 | 3568 | |
| | | | Book | 2022 | | |
| 2. Municipality BATH | | | Page | 3568 | | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - F | REGISTRY US | SE ONLY | |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN | or federal ID | |
| DOLLOFF, JOEL E | | | | 0.1.0011 | (115 | |
| 3c. Last name, first name, MI; or business name DOLLOFF, CYNTHIA L | | | | 3d. SSN 6 | or federal ID | |
| 3e. Mailing address after purchasing this property | / | 3f. Municipality | | 3g. State | 3h. ZIP Code | |
| 59 MIDDLE STREET | | BATH | | ME | 04530 | |
| 4. GRANTOR/SELLER | | | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN o | or federal ID | |
| LYNCH, TIMOTHY J | | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN o | or federal ID | |
| LYNCH, SUSAN J | | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code | |
| 166 LINCOLN AVENUE | | HAVERILL | | MA | 01830 | |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that a | | | | |
| 39 | 051 | No maps exis | erty being sold (see in | | 202 | |
| 5c. Physical location | | Multiple parc Portion of pa | _ | d. Acreage (see | instructions) | |
| 59 MIDDLE STREET | | Not applicable | е | 0.31 | | |
| 6. TRANSFER TAX | he transfer is a gift, enter "0") | | 62 | ¢02.050 | 00 | |
| oa. i dichase price (ii t | ne transier is a girt, efficier 0 / | | | \$83,050 | ■00 | |
| 6b. Fair market value (l | Enter a value only if you entered ' | "0" or a nominal value or | n line 6a) 6b. | | ■ 00 | |
| 6c. Exemption claim - Check the box if eith | er grantor or grantee is claiming e | exemption from transfer | tax and enter explanation below | w. | | |
| | | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | | | | |
| 05-19-2022 | open space, tree growth, o be triggered by developme | | | alty may | CLASSIFIED | |
| 9. SPECIAL CIRCUMSTANCES. Were the | | | NCOME TAX WITHHELD. | • | ot required to | |
| the transfer that suggest the price paid was market value? If yes, check the box and en | | | old Maine income tax beca | | | |
| | , | | Seller has qualified as a Ma A waiver has been received | | e Tax Assessor | |
| The sales price noted above is | one-half the value as | | U | | sheo Corantees | |
| | | | he transfer is a foreclosure | | | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the tion provided by Grantor(s) and Grantee(s) | information contained herein | is true, correct and c | omplete. Declaration of pre | parer is base | d on informa- | |
| constitutes a legal signature. PREPARER. Name of preparer: JAMES 1 | HOPKINSON | Phone number | er: (207) 772-5845 | | | |
| Mailing address: 6 CITY CENTI | | | s:_jhopkinson@hablaw | .com | | |
| | | | | | | |

PROCESSED ONLINE.

DLN: 1002240195198

| Registry | SAGADAHOC |
|------------------|-------------|
| Date Recorded | 05/26/2022 |
| Time Recorded | 01:13:00 PM |
| nsfer Tax Amount | \$1,293.60 |
| Document Number | 2022r-03648 |
| Book | 2022 |
| Page | 3648 |

| DO NOT R | RE-PROCESS. | Form RE | | Time Recorded | 01:13:0 | |
|---------------------------|-----------------------------|--|------------------------------|--|----------------|----------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,293.0 | 50 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-0 | 3648 |
| 2. Municipality RA | rii | | | Book | 2022 | |
| 2. Municipality BA | I H | | | Page | 3648 | |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - R | EGISTRY US | SE ONLY |
| | me, MI; or business name | | | | 3b. SSN o | or federal ID |
| EVANS, KRIS | | | | | 24 CCN a | or federal ID |
| Sc. Last name, inst name | me, MI; or business name | | | | 30. 33N C | ir lederal ID |
| 3e. Mailing address after | er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 5 EDGETT ST | ΓREET | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLE | ER | | | | | |
| 4a. Last name, first name | me, MI; or business name | | | | 4b. SSN o | r federal ID |
| PERRY, JOSE | EPH D | | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN o | r federal ID |
| PERRY, KAR | EN E | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 1007 KNOB H | HILL ROAD | | INVERNESS | | FL | 34450 |
| 5. PROPERTY 5a | ı. Map Block | Lot Sub-lot | Check any that ap | | | |
| | 28 | 241 | No maps exis Multiple parce | erty being sold (see ins | | 201 |
| 5c. Physical location | | | Portion of par | | . Acreage (see | instructions) |
| 5 EDGETT ST | ΓREET | | Not applicable | 9 | 0.00 | |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$294,000 |) .00 |
| | | | | | Ψ251,000 | |
| | | nter a value only if you entered " | | | | ■00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming e | exemption from transfer t | ax and enter explanation below | <i>l</i> . | |
| | | | | | | |
| | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, or | | | | OL A COLFIED |
| 05-25-2022 | | be triggered by developmen | | | | CLASSIFIED |
| | | e any special circumstances either more or less than its fa | | ICOME TAX WITHHELD. T old Maine income tax becau | | ot required to |
| | , check the box and ent | | | eller has qualified as a Mai | ne resident | |
| | | | | waiver has been received | | |
| | | | | onsideration for the propert he transfer is a foreclosure | • | 1 \$50,000 |
| | | 36 M.R.S. § 4641-K, I declar | | | | |
| • | ntor(s) and Grantee(s) a | and of which preparer has an | | | | |
| | of preparer: MARTIN | E MADDEN | Phone numbe | r: (603) 413-7089 | | |
| Mailing address: | 1 BEDFORD FA | ARMS DRIVE, STE 202 | Email address | martine@greateasttit | le.com | |
| | BEDFORD, NH | 03110 | Fax number:_ | | | |
| | | | _ | | | , 11/18 |

PROCESSED

DLN: 1002240195300

MAINE REAL ESTATE

| Registry | SAGADAHOC |
|---------------------|-------------------|
| Date Recorded | 05/27/2022 |
| Time Recorded | 09:20:00 AM |
| Transfer Tax Amount | \$0.00 |
| Document Number | 2022r-03667 |
| Book | 2022 |
| Page | 3667 |
| BOOK/PAGE - RI | EGISTRY LISE ONLY |

| ONLINE. | TRANSFER TAX DE | ECLARATION | Date Recorded | 03/21/2 | 022 |
|--|--|--|---|-----------------|----------------|
| DO NOT RE-PROCESS. | Form RE | | Time Recorded | 09:20:0 | 0 AM |
| | Do not use re | ed ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGADAHOC | | | Document Number | 2022r-0 | 3667 |
| | | | Book | 2022 | |
| 2. Municipality BATH | | | Page | 3667 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY US | SE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN | or federal ID |
| PORTEOUS, ROBERT C. | | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN d | or federal ID |
| PORTEOUS, CHRISTINE N | | Of Manager III | | 0.00 | 01. 715.0 |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | DEACH | 3g. State | 3h. ZIP Code |
| 5312 RIVER AVENUE | | NEWPORT I | SEACH | CA | 92663 |
| 4. GRANTOR/SELLER 4a. Last name, first name, MI; or business name PORTEOUS, ROBERT | | | | 4b. SSN c | or federal ID |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN o | or federal ID |
| PORTEOUS, CHRISTINE | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 5312 RIVER AVENUE | | NEWPORT I | REACH | CA | 92663 |
| 5c. Physical location 1537 WASHINGTON STREET | T, BATH, ME | Multiple parce Portion of par Not applicable | cel 5c | I. Acreage (see | instructions) |
| 6 TRANSEER TAY | | | | | |
| 6a. Purchase price (if the | e transfer is a gift, enter "0") | | 6а. | \$0 | ■00 |
| 6b. Fair market value (Er | nter a value only if you entered "0" | or a nominal value on | line 6a) 6b. | \$1 | ■ 00 |
| 6c. Exemption claim - $ X $ Check the box if either | r grantor or grantee is claiming ex | emption from transfer t | ax and enter explanation below | v. | |
| The conveyance transfer proper | ty as tenants-in-comm | non. Robert and | d Christine are husb | and and w | ife and no sa |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 05-25-2022 | 8. CLASSIFIED. WARNING open space, tree growth, or be triggered by development | working waterfront, | a substantial financial pena | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was a market value? If we should the bound and | either more or less than its fai | | COME TAX WITHHELD. T | • | ot required to |
| market value? If yes, check the box and ente | я ехріанаціон реюж. | | eller has qualified as a Mai waiver has been received | | e Tay Accessor |
| | | | onsideration for the proper | | |
| | | | he transfer is a foreclosure | • | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the in tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. PREPARER. Name of preparer: YVETT IO | nformation contained herein is and of which preparer has any | strue, correct and co knowledge. I under | mplete. Declaration of prep | oarer is base | d on informa- |
| 1000 1 () 7 () 7 | REET, SUITE 700 | | yiglesias@ptwww.co | om | |
| Mailing address: 1900 MAIN STE | | | 5 | ,,,, | |
| IKVINE, CA 920 | 717 | Fax number:_ | | Par | v 11/18 |

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 05/27/2022 |
| Time Recorded | 09:21:00 AM |
| ransfer Tax Amount | \$0.00 |
| Document Number | 2022r-03668 |
| Book | 2022 |
| Page | 3668 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. | Form R | ETTD | Time Recorded | 09:21:00 AM | |
|--|--|---|--|---|--|
| Do Nor ILL TROCES. | Do not use | red ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGADAHOC | | | Document Number | 2022r-0 | 3668 |
| | | | Book | 2022 | |
| 2. Municipality BATH | | | Page | 3668 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - I | REGISTRY US | SE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN | or federal ID |
| THE PORTEOUS FAMILY T 3c. Last name, first name, MI; or business name | | ED MAY 9, 202 | 22, | 34 SSN 6 | or federal ID |
| oc. Last Hame, mist hame, wil, or business hame | 5 | | | 30, 3314 0 | or rederal ID |
| 3e. Mailing address after purchasing this propert | ty | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 5312 RIVER AVENUE | | NEWPORT | BEACH | CA | 92663 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | 9 | | | 4b. SSN o | r federal ID |
| PORTEOUS, ROBERT F. | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN o | r federal ID |
| PORTEOUS, CHRISTINE N | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 5312 RIVER AVENUE | | NEWPORT | ВЕАСН | CA | 92663 |
| 5. PROPERTY 5a. Map Block BTTH M1 5c. Physical location 1537 WASHINGTON STREE | | Check any that ap No maps exis Multiple parce Portion of pal Not applicabl | number that best desc erty being sold (see in els rcel 5 | | 203 instructions) |
| 6. TRANSFER TAX 6a. Purchase price (If | the transfer is a gift, enter "0") | | 6a. | \$0 | ■ 00 |
| | | | | Ψ.0 | |
| 6b. Fair market value (| (Enter a value only if you entered ' | '0" or a nominal value or | ı line 6a) 6b. | \$1 | ■00 |
| 6b. Fair market value ($ \mbox{6c. Exemption claim - } \ X \ \ \mbox{Check the box if eith} $ | ` , | | , | \$1 | |
| | her grantor or grantee is claiming | exemption from transfer | tax and enter explanation belo | \$1 | |
| 6c. Exemption claim - \overline{X} Check the box if eith | her grantor or grantee is claiming | exemption from transfer Christine's living G TO BUYER - If the or working waterfront, | tax and enter explanation beloge trust. property is classified as far a substantial financial pen | \$1 w. | |
| 6c. Exemption claim - X Check the box if eith The conveyance transfers prop 7. DATE OF TRANSFER (MM-DD-YYYY) | her grantor or grantee is claiming of perty into Robert and (8. CLASSIFIED. WARNING open space, tree growth, open triggered by development and special circumstances is either more or less than its formal per special circumstances. | exemption from transfer Christine's living G TO BUYER - If the or working waterfront, ont, subdivision, partiti with fair S A | tax and enter explanation beloge trust. property is classified as far a substantial financial pen | w. mland, alty may The buyer is nause: line resident from the Stat rty is less than | CLASSIFIED ot required to |
| 6c. Exemption claim - X Check the box if eith The conveyance transfers property. 7. DATE OF TRANSFER (MM-DD-YYYY) 05-25-2022 9. SPECIAL CIRCUMSTANCES. Were the the transfer that suggest the price paid was market value? If yes, check the box and entered to the best of my knowledge and belief the tion provided by Grantor(s) and Grantee(s) constitutes a legal signature. | her grantor or grantee is claiming of the perty into Robert and (8. CLASSIFIED. WARNING open space, tree growth, open space, tree growth, open triggered by development of the period | exemption from transfer Christine's living G TO BUYER - If the or working waterfront, ent, subdivision, partiti with fair or withh or | tax and enter explanation belong trust. property is classified as far a substantial financial penion, or change in use. NCOME TAX WITHHELD. old Maine income tax because the second of the property of the property of the transfer is a foreclosure of this return with the Grand omplete. Declaration of prestand that the submission | w. mland, alty may The buyer is nause: ine resident from the Stat rty is less than e sale tor(s) and Gra | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |
| 6c. Exemption claim - X Check the box if eith The conveyance transfers property. 7. DATE OF TRANSFER (MM-DD-YYYY) 05-25-2022 9. SPECIAL CIRCUMSTANCES. Were the the transfer that suggest the price paid was market value? If yes, check the box and element to the best of my knowledge and belief the tion provided by Grantor(s) and Grantee(s) constitutes a legal signature. PREPARER. Name of preparer: YVETT | her grantor or grantee is claiming of perty into Robert and (8. CLASSIFIED. WARNING open space, tree growth, of the betriggered by development of the betriggered by developme | Christine's living G TO BUYER - If the reworking waterfront, ent, subdivision, partitivith fair withh | tax and enter explanation belong trust. property is classified as far a substantial financial penion, or change in use. NCOME TAX WITHHELD. Told Maine income tax because the second of the property of the transfer is a foreclosure of this return with the Grant omplete. Declaration of presented that the submission of the transfer is a foreclosure of the transfer is a foreclosure of this return with the Grant omplete. Declaration of presented that the submission of the transfer is a foreclosure of this return with the Grant omplete. Declaration of presented that the submission of the transfer is a foreclosure of the tran | w. Imland, alty may The buyer is nause: line resident from the Stat rty is less than e sale tor(s) and Gra parer is based of an electron | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |
| 6c. Exemption claim - X Check the box if eith The conveyance transfers property. 7. DATE OF TRANSFER (MM-DD-YYYY) 05-25-2022 9. SPECIAL CIRCUMSTANCES. Were the the transfer that suggest the price paid was market value? If yes, check the box and ending the to the best of my knowledge and belief the tion provided by Grantor(s) and Grantee(s) constitutes a legal signature. PREPARER. Name of preparer: YVETT | her grantor or grantee is claiming of the perty into Robert and (8. CLASSIFIED. WARNING open space, tree growth, open s | Christine's living G TO BUYER - If the reworking waterfront, ent, subdivision, partitivith fair withh | tax and enter explanation belong trust. property is classified as far a substantial financial penion, or change in use. NCOME TAX WITHHELD. Told Maine income tax because the second period of the property of the transfer is a foreclosure and this return with the Grand period that the submission that the submission period the property of the transfer is a foreclosure of the property of the transfer is a foreclosure of the tra | w. Imland, alty may The buyer is nause: line resident from the Stat rty is less than e sale tor(s) and Gra parer is based of an electron | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|-------------------|
| Date Recorded | 05/27/2022 |
| Time Recorded | 12:35:00 PM |
| ransfer Tax Amount | \$2,200.00 |
| Document Number | 2022r-03684 |
| Book | 2022 |
| Page | 3684 |
| BOOK/PAGE - R | EGISTRY LISE ONLY |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 12:35:00 PM |
|---|--|--|---------------------------------|--|------------------------------|
| | | Do not use red ink. | | Transfer Tax Amount | \$2,200.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-03684 |
| 2 Municipality DAT | 711 | | | Book | 2022 |
| 2. Municipality BAT | .Н | | | Page | 3684 |
| 3. GRANTEE/PURCI | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | ne, MI; or business name | | | | 3b. SSN or federal ID |
| RSP BRIDGT | | | | | |
| | ne, MI; or business name | | | | 3d. SSN or federal ID |
| RSP PLEASA | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 44 VINE STRI | | | SOUTH BER | PWICK | ME 03908 |
| | | | SOUTH BEN | WICK | WIE 03700 |
| 4. GRANTOR/SELLE 4a. Last name. first name. | ne, MI; or business name | | | | 4b. SSN or federal ID |
| BISSIAS, PET | | | | | |
| | ne, MI; or Business name | | | | 4d, CCN or fodoral ID |
| PAPADOPOL | | | | | 4d. SSN or federal ID |
| | oos, wer | | | | |
| 4e. Mailing address | DIDOAD | | 4f. Municipality | T | 4g. State 4h. ZIP Code |
| 418 MOUNTA | AIN ROAD | | HARPSWEL | | ME 04079 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap No maps exis | number that best descri | ibes the prop- |
| | 27 | 140 | Multiple parce | erty being sold (see ins | tructions). |
| 5c. Physical location | | | Portion of par | rcel 5d | . Acreage (see instructions) |
| 737 WASHING | GTON ST. | | Not applicable | е | 0.16 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$500,000 .00 |
| | 6b Fair market value (F | nter a value only if you entered " | '0" or a nominal value or | line 6a) 6b | 00 |
| Co Evenuetian eleine | | | | | ■00 |
| 6c. Exemption claim - | Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer | ax and enter explanation below | <i>J.</i> |
| | | | | | |
| 7. DATE OF TRANSF | | | | property is classified as farn a substantial financial pena | Ity may |
| 05-27-2022 | | be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUM | MSTANCES. Were there | e any special circumstances either more or less than its f | with 10. IN | ICOME TAX WITHHELD. T old Maine income tax becau | |
| | check the box and ent | | | seller has qualified as a Mai | |
| | | | | | from the State Tax Assessor |
| | | | | Consideration for the propert The transfer is a foreclosure | |
| 11 OATH Awara of r | applies as set forth in | 36 M.R.S. § 4641-K, I decla | | | |
| to the best of my know tion provided by Gran | wledge and belief the ir ntor(s) and Grantee(s) a | of Minklor 3 404 1-18, I decid and of which preparer has ar | is true, correct and co | omplete. Declaration of prep | parer is based on informa- |
| constitutes a legal sig PREPARER. Name of | gnature. f preparer: <u>BERNST</u>] | EIN SHUR | Phone number | er: (207) 774-1200 | |
| Mailing address: | 100 1 17551 5 0 | | | s:_tberube@bernsteinsh | ur.com |
| | PORTLAND, M | Œ 04104 | Fax number: | | |
| - | | | | | Rev 11/18 |

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DLN: 1002240195471

| Registry | SAGADAHOC |
|--------------------|-------------|
| Date Recorded | 05/27/2022 |
| Time Recorded | 02:28:00 PM |
| ransfer Tax Amount | \$0.00 |
| Document Number | 2022r-03689 |
| Book | 2022 |
| Page | 3689 |
| | |

| DO NOT R | RE-PROCESS. | Form RI | ETTD | Time Recorded | 02:28:00 PM | |
|---------------------------------------|--|--|--------------------------------|---|--|-------------|
| | | Do not use | Do not use red ink. | | \$0.00 | |
| 1. County SAG | ADAHOC | | | Document Number | 2022r-03689 | |
| | | | | Book | 2022 | |
| 2. Municipality BA | TH | | | Page | 3689 | |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - R | REGISTRY USE ONI | _Y |
| | me, MI; or business name | | | | 3b. SSN or federa | al ID |
| | I, WILLIAM H | | | | | |
| | me, MI; or business name L RUSSELL, CAR | OI A | | | 3d. SSN or federa | al ID |
| | er purchasing this property | OL A | 3f. Municipality | | 3g. State 3h. ZII | Code |
| 239 CENTRE | | | BATH | | ME 045 | |
| 4. GRANTOR/SELL | ER | | | | | |
| 4a. Last name, first na | me, MI; or business name | | | | 4b. SSN or federa | I ID |
| RUSSELL, III | I, WILLIAM H | | | | | |
| 4c. Last name, first nar | me, MI; or Business name | | | | 4d. SSN or federa | I ID |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZII | ⊃ Code |
| 239 CENTRE | STREET | | BATH | | ME 045 | 530 |
| 5. PROPERTY 5a | a. Map Block | Lot Sub-lot | Check any that a | | | |
| | 28 | 327 02 | No maps exis | erty being sold (see ins | | 1 |
| 5c. Physical location | | | Multiple parc Portion of pa | _ | d. Acreage (see instruct | ions) |
| 239 CENTRE | STREET | | Not applicable | е | 0.34 | |
| 6. TRANSFER TAX | 6a Purchase price (If the | transfer is a gift, enter "0") | | 6a | \$0 | . 00 |
| | | | | | | 00 |
| | 6b. Fair market value (Er | iter a value only if you entered " | 0" or a nominal value or | n line 6a) 6b. | \$151,600 | ■00 |
| | | grantor or grantee is claiming e | | | V. | |
| CONVEYAN | CE BETWEEN S | POUSES TO CREA | TE JOINT TEN | NANCY | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | | | |
| 05-23-2022 | 2 | be triggered by developme | | • | CLAS | SIFIED |
| | | any special circumstances either more or less than its f | | NCOME TAX WITHHELD. T | | ired to |
| · · · · · · · · · · · · · · · · · · · | s, check the box and ente | | u | Seller has qualified as a Mai | | |
| | | | A | A waiver has been received | from the State Tax A | |
| | | | | Consideration for the proper The transfer is a foreclosure | | 00 |
| 11. OATH, Aware of | penalties as set forth in | 36 M.R.S. § 4641-K, I decla | | | |) and |
| to the best of my kno | owledge and belief the in | formation contained herein nd of which preparer has ar | is true, correct and c | omplete. Declaration of prep | parer is based on inf | orma- |
| constitutes a legal si | ignature. | | | | or arr or c orroffic foffil | retuiii |
| PREPARER. Name of | of preparer: JAMES H | OFKINSUN | Phone number | er: (207) 772-5845 | | |
| Mailing address: | | | | | | |
| | 6 CITY CENTE | | Email addres | s: jhopkinson@hablaw | .com | |
| _ | 6 CITY CENTER PORTLAND, M | R SUITE 400 | Email addres Fax number: | | .com Rev. 11/18 | |

PROCESSED ONLINE.

MAINE REAL ESTATE TRANSFER TAX DECLARATION Form RETTD

SAGADAHOC Registry 06/02/2022 Date Recorded 11:51:00 AM Time Recorded

| DO NOT RE-PROCESS. | | | Time recorded | |
|---|---|--|---|--|
| DO NOT RETROCESS. | Do not use | | Transfer Tax Amount | \$952.60 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03783 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 3783 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - F | REGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| THE UPTOWN, LP, | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 10 FREE STREET, 3RD FLOO | /D | PORTLAND | | ME 04101 |
| <u> </u> |)K | TORTLAND | | WIE 04101 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| SZANTON MONKS PROPER | TIES, LLC, | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| 46. Last Harrie, mist harrie, wii, or business harrie | | | | 4u. SSN of lederal ID |
| | | | | |
| 4e. Mailing address | ND. | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 10 FREE STREET, 3RD FLOO | | PORTLAND | | ME 04101 |
| 5. PROPERTY 5a. Map Block 26 | Lot Sub-lot 218 | Check any that app No maps exist | number that best desc | ribes the prop- |
| 20 | 210 | Multiple parcel | erty being sold (see in | structions). |
| 5c. Physical location | | Portion of parc | cel 5 | d. Acreage (see instructions) |
| 26 SUMMER STREET | | Not applicable | | 0.59 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$216,500 .00 |
| Ch. Fair market value (F | ntor a value only if you entered t | O" or a naminal value on | line (co) | |
| | nter a value only if you entered ' | | | ■00 |
| 6c. Exemption claim - Check the box if either | r grantor or grantee is claiming o | exemption from transfer to | ax and enter explanation belo | W. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, o | | . , | |
| 06-01-2022 | be triggered by developme | • | • | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | | | | The buyer is not required to |
| the transfer that suggest the price paid was market value? If yes, check the box and ent | | | old Maine income tax beca eller has qualified as a Ma | |
| | | | • | from the State Tax Assessor |
| | | | onsideration for the prope | • |
| | | TI | ne transfer is a foreclosure | e sale |
| 11. OATH. Aware of penalties as set forth in | | | | |
| to the best of my knowledge and belief the ir tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | nformation contained herein | re that I have reviewed is true, correct and co | mplete. Declaration of pre | parer is based on informa- |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | nformation contained herein and of which preparer has an | re that I have reviewed is true, correct and co ny knowledge. I unders | mplete. Declaration of pre | parer is based on informa- |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. PREPARER. Name of preparer: JANET L | nformation contained herein and of which preparer has an | re that I have reviewed is true, correct and cony knowledge. I unders | mplete. Declaration of pre stand that the submission | parer is based on informa- of an electronic form return |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. PREPARER. Name of preparer: JANET L | nformation contained herein and of which preparer has a EDOUX WAY, SUITE 600 | re that I have reviewed is true, correct and cony knowledge. I understand process. Phone number Email address | mplete. Declaration of prestand that the submission (207) 772-1941 Ext | parer is based on informa- of an electronic form return |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 06/02/2022 |
| Time Recorded | 11:51:00 AM |
| ransfer Tax Amount | \$3,960.00 |
| Document Number | 2022r-03784 |
| Book | 2022 |
| Page | 3784 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form RETTD | | Time Recorded | 11:51:00 AM |
|---|--|--|--|--|---|
| | | Do not use | red ink. | Transfer Tax Amount | \$3,960.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-03784 |
| 2. Municipality RAT | ГН, ВАТН | | | Book | 2022 |
| DA1 | п, ватп | | | Page | 3784 |
| 3. GRANTEE/PURCI | HASER | | | BOOK/PAGE - F | REGISTRY USE ONLY |
| | ne, MI; or business name | | | | 3b. SSN or federal ID |
| THE UPTOW | | | | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| | EET, 3RD FLOC |)R | PORTLAND | | ME 04101 |
| 4. GRANTOR/SELLE | | | | | |
| | me, MI; or business name | | | | 4b. SSN or federal ID |
| BATH HOUSI | ING DEVELOPN | MENT CORPORAT | ION, | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 80 CONGRES | S AVENUE | | BATH | | ME 04530 |
| | . Map Block | Lot Sub-lot | Check any that ap | bly 5b. Type of property - 6 | |
| O. I IXOI EIXI I Ga. | 26 | 248-1 | No maps exist | number that best desc | ribes the prop- |
| S. Divided by the | | | X Multiple parce | s | |
| 5c. Physical location 178 FRONT S' | TDEET | | Portion of pare Not applicable | | d. Acreage (see instructions) 0.41 |
| 176 TRONT S | TREET | | | | 0.41 |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$900,000 .00 |
| | 6b. Fair market value (Enter a value only if you entered "0" or a nomina | | | | |
| 6c. Exemption claim - | 6b. Fair market value (E | nter a value only if you entered ' | '0" or a nominal value on | line 6a) 6b. | ■ 00 |
| oc. Exemption daim - | | | | | |
| oc. Exemption daim - | | nter a value only if you entered ' | | | |
| | Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer ta | ax and enter explanation below | N. |
| 7. DATE OF TRANSF | Check the box if either | r grantor or grantee is claiming of the state of the stat | exemption from transfer to G TO BUYER - If the p r working waterfront, a | ax and enter explanation below roperty is classified as fand substantial financial pena | w. mland, |
| 7. DATE OF TRANSF 06-01-2022 | Check the box if either FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme | exemption from transfer to G TO BUYER - If the p r working waterfront, a nt, subdivision, partitio | ax and enter explanation below roperty is classified as farm substantial financial pena on, or change in use. | mland, alty may CLASSIFIED |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were theregest the price paid was | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | exemption from transfer to G TO BUYER - If the p r working waterfront, a nt, subdivision, partition | ax and enter explanation below roperty is classified as farm substantial financial pena on, or change in use. | mland, alty may CLASSIFIED The buyer is not required to |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were there | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | G TO BUYER - If the province with the province w | roperty is classified as fari substantial financial pena- in, or change in use. COME TAX WITHHELD. T ald Maine income tax beca eller has qualified as a Ma | mland, alty may CLASSIFIED The buyer is not required to use: ine resident |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were theregest the price paid was | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | G TO BUYER - If the province with 10. IN fair withholds X Son A | roperty is classified as fari substantial financial pena on, or change in use. COME TAX WITHHELD. T Id Maine income tax beca eller has qualified as a Ma waiver has been received | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were theregest the price paid was | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | G TO BUYER - If the property of the property o | roperty is classified as fari substantial financial pena- in, or change in use. COME TAX WITHHELD. T ald Maine income tax beca eller has qualified as a Ma | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor ty is less than \$50,000 |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg market value? If yes, | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was a check the box and enterpolations as set forth in | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme e any special circumstances either more or less than its fer explanation below. | exemption from transfer to G TO BUYER - If the property of the | roperty is classified as fari substantial financial pena- in, or change in use. COME TAX WITHHELD. Told Maine income tax beca- eller has qualified as a Ma waiver has been received consideration for the proper- ne transfer is a foreclosured | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg market value? If yes, | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was check the box and enterprise as set forth in wledge and belief the in | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme e any special circumstances either more or less than its fer explanation below. | exemption from transfer to BUYER - If the property of the prop | roperty is classified as farily substantial financial penalyn, or change in use. COME TAX WITHHELD. Told Maine income tax becauseller has qualified as a Mawaiver has been received consideration for the property transfer is a foreclosured this return with the Grant mplete. Declaration of pre | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg market value? If yes, 11. OATH. Aware of p to the best of my know tion provided by Gran constitutes a legal sig | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was check the box and enterprice paid was check the box and enterprice and belief the interprice of the price and Grantee(s) and Grantee(s) and Grantee(s) and grantere. | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its fer explanation below. 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an | exemption from transfer to BUYER - If the provided representation of the provided representat | roperty is classified as farm substantial financial penalin, or change in use. COME TAX WITHHELD. Told Maine income tax becauseller has qualified as a Mawaiver has been received consideration for the proper the transfer is a foreclosured this return with the Grant mplete. Declaration of prestand that the submission | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| 7. DATE OF TRANSF 06-01-2022 9. SPECIAL CIRCUM the transfer that sugg market value? If yes, 11. OATH. Aware of p to the best of my know tion provided by Gran constitutes a legal sig PREPARER. Name of | Check the box if either FER (MM-DD-YYYY) MSTANCES. Were there gest the price paid was check the box and enterprice of the price paid was check the box and enterprice of the price of the | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its fer explanation below. 36 M.R.S. § 4641-K, I declar formation contained herein and of which preparer has an EDOUX | exemption from transfer to BUYER - If the property of the prop | roperty is classified as farm substantial financial penalon, or change in use. COME TAX WITHHELD. To all Maine income tax because the folial manufacture of the property of the received consideration for the property of this return with the Grant mplete. Declaration of prestand that the submission of the control of the property of the return with the Grant mplete. Declaration of prestand that the submission of the control of the property of the return with the Grant mplete. | mland, alty may CLASSIFIED The buyer is not required to use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- of an electronic form return |
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MAINE REVENUE SERVICES SUPPLEMENT TO THE REAL ESTATE TRANSFER TAX FORM

This form is to be used in conjunction with the Real Estate Transfer Tax Form and provides additional information when necessary.

Please attach this form to the original transfer tax form before submitting to the County Registry of Deeds.

Use additional forms as necessary.

If you have any questions, please contact the property Tax Division at 207-287-2013 or e-mail: prop.tax@maine.gov.

| Additional Grantees/Purchasers – Last Name First | Social Security or Fed. ID # |
|--|------------------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| Additional Grantors/Sellers – Last Name First | Social Security or Fed. ID # |
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. <u>_</u> | |
| 6. | |
| 7. | |
| 8. | |

| Additional Municipalities | Map—Block—Lot—Sub-Lot |
|---------------------------|-----------------------|
| 1. BATH | 26 249 - |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|------------------|-------------------|
| Date Recorded | 06/02/2022 |
| Time Recorded | 11:57:00 AM |
| nsfer Tax Amount | \$1,826.00 |
| Document Number | 2022r-03803 |
| Book | 2022 |
| Page | 3803 |
| | EGISTRY LISE ONLY |

| DO NOT RE-PI | ROCESS. | Form RI | ETTD | Time Recorded | 11:57:00 AM | |
|---|---|--|---|--|--|-----------|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,826.00 | |
| 1. County SAGADA | НОС | | | Document Number | 2022r-03803 | |
| 0.14 | | | | Book | 2022 | |
| 2. Municipality BATH | | | | Page | 3803 | |
| 3. GRANTEE/PURCHASE | R | | | BOOK/PAGE - F | REGISTRY USE ONLY | |
| 3a. Last name, first name, MI; | | | | | 3b. SSN or federal ID | |
| OPPERMANN, JE | | | | | | |
| 3c. Last name, first name, MI; | | | | | 3d. SSN or federal ID | |
| OPPERMANN, NI 3e. Mailing address after purch | | | 3f. Municipality | | 3g. State 3h. ZIP Code | • |
| 433 HIGH STREE | | | BATH | | ME 04530 | е |
| | 1 | | DAIII | | WIE 04330 | |
| 4. GRANTOR/SELLER 4a. Last name, first name, MI; | or business name | | | | 4b. SSN or federal ID | |
| SNYDER, DUANI | | | | | | |
| 4c. Last name, first name, MI; | | | | | 4d. SSN or federal ID | |
| SNYDER, LAURA | | | | | a. Colv of leading 15 | |
| , | | | 45 Municipality | | 4 State 4b 7ID Code | |
| 4e. Mailing address 163 HIGH STREE | т | | 4f. Municipality BATH | | 4g. State 4h. ZIP Code 4h. ZIP | е |
| | | Lat. Cost lat | | pply 5b. Type of property - | | |
| 5. PROPERTY 5a. Map | Block | Lot Sub-lot | Check any that a | number that best desc | ribes the prop- | |
| .).) | | | | erty heing sold (see in | | |
| | | 21 | Multiple parc | els | | |
| 5c. Physical location | T | 21 | Multiple parc | els rcel 5 | d. Acreage (see instructions) | |
| | Γ | 21 | Multiple parc | els rcel 5 | | |
| 5c. Physical location 433 HIGH STREE | | transfer is a gift, enter "0") | Multiple parc Portion of pa Not applicab | els sold (see in sels sold (see in sel sold (see in see i | d. Acreage (see instructions) 0.15 | 00 |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F | Purchase price (If the | | Multiple parc Portion of pa Not applicab | erty being sold (see in els rcel 5 | d. Acreage (see instructions) 0.15 \$415,000 | |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F | turchase price (If the | transfer is a gift, enter "0") | Multiple parc Portion of pa Not applicab | erty being sold (see in els rcel 5-le 5-le 6a. | d. Acreage (see instructions) 0.15 \$415,000 | 00 |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F | turchase price (If the | transfer is a gift, enter "0") | Multiple parc Portion of pa Not applicab | erty being sold (see in els rcel 5-le 5-le 6a. | d. Acreage (see instructions) 0.15 \$415,000 | |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch | urchase price (If the air market value (Er | e transfer is a gift, enter "0") nter a value only if you entered ' grantor or grantee is claiming o | Multiple parce Portion of pa Not applicab "0" or a nominal value or exemption from transfer | erty being sold (see in els rcel 5.00 cels rcel 5.0 | d. Acreage (see instructions) 0.15 \$415,000 | |
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| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch 7. DATE OF TRANSFER (N 06-01-2022 | Purchase price (If the air market value (Er neck the box if either | e transfer is a gift, enter "0") ster a value only if you entered ' grantor or grantee is claiming of 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme | Multiple parc Portion of pa Not applicab "0" or a nominal value of exemption from transfer G TO BUYER - If the or working waterfront, ent, subdivision, partit | erty being sold (see in els rcel 5 | d. Acreage (see instructions) 0.15 \$415,000 w. mland, alty may CLASSIFIE | 00 |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch 7. DATE OF TRANSFER (N 06-01-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th | Purchase price (If the air market value (Er neck the box if either MM-DD-YYYY) ICES. Were there e price paid was a | transfer is a gift, enter "0") ter a value only if you entered ' grantor or grantee is claiming a 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | Multiple parc Portion of pa Not applicab '0" or a nominal value of exemption from transfer G TO BUYER - If the or working waterfront, ent, subdivision, partit with 10. If | erty being sold (see in els rcel 5.00 cm | d. Acreage (see instructions) 0.15 \$415,000 w. mland, alty may CLASSIFIE | 00 |
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| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch 7. DATE OF TRANSFER (N 06-01-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th | Purchase price (If the air market value (Er neck the box if either MM-DD-YYYY) ICES. Were there e price paid was a | transfer is a gift, enter "0") ter a value only if you entered ' grantor or grantee is claiming a 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances either more or less than its f | Multiple parce Portion of pa Not applicable "0" or a nominal value or exemption from transfer G TO BUYER - If the r working waterfront, ent, subdivision, partit with Tair X S | erty being sold (see in els reel 5.5) reel 5.6 Ite 6a) | d. Acreage (see instructions) 0.15 \$415,000 w. mland, alty may CLASSIFIE The buyer is not required to the state Tax Assessing the state Tax Assessing try is less than \$50,000 | D |
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| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch 7. DATE OF TRANSFER (N 06-01-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th market value? If yes, check | durchase price (If the air market value (Er neck the box if either MM-DD-YYYY) ICES. Were there e price paid was at the box and enter the box and enter eand belief the in and Grantee(s) as as | e transfer is a gift, enter "0") Inter a value only if you entered the grantor or grantee is claiming at the grantor or gra | Multiple parce Portion of pa Not applicab "0" or a nominal value of exemption from transfer G TO BUYER - If the er working waterfront, ent, subdivision, partit with 10. If withh X 3 Greet that I have reviewed is true, correct and cony knowledge. I under | erty being sold (see in els recel 5.5 le 6.5 | d. Acreage (see instructions) 0.15 \$415,000 w. mland, alty may CLASSIFIE The buyer is not required to the state Tax Assessing the state Tax Assessing type is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa | D to sor |
| 5c. Physical location 433 HIGH STREE 6. TRANSFER TAX 6a. F 6b. F 6c. Exemption claim - Ch 7. DATE OF TRANSFER (N 06-01-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th market value? If yes, check 11. OATH. Aware of penaltit to the best of my knowledg tion provided by Grantor(s) constitutes a legal signature PREPARER. Name of preparations. | durchase price (If the air market value (Er neck the box if either MM-DD-YYYY) ICES. Were there e price paid was at the box and enter the box and enter eand belief the in and Grantee(s) as as | e transfer is a gift, enter "0") Iter a value only if you entered the grantor or grantee is claiming to the grantor or gran | Multiple parce Portion of pa Not applicab "0" or a nominal value of exemption from transfer G TO BUYER - If the er working waterfront, ent, subdivision, partitive with X S A A C C C C C C C C C C C C C C C C C | property is classified as far a substantial financial penaion, or change in use. NCOME TAX WITHHELD. Told Maine income tax because Helper has qualified as a Mark waiver has been received Consideration for the property is a foreclosure and this return with the Gran omplete. Declaration of prestand that the submission | d. Acreage (see instructions) 0.15 \$415,000 w. mland, alty may CLASSIFIE The buyer is not required to buse: ine resident from the State Tax Assessing is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on information of an electronic form returning the same of an electronic form returning the same is based on information of an electronic form returning the same is based on information of an electronic form returning the same instance is based on information of an electronic form returning the same instance is based on information of an electronic form returning the same instance is based on information of an electronic form returning the same instance is based on information of an electronic form returning the same instance is a same instance in the same instance in the same instance is a same instance in the same instance in the same instance is a same instance in the same instance in the same instance is a same instance in the same in the same instance in the same in the same | D to sor |
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PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 06/02/2022 |
| Time Recorded | 01:57:00 PM |
| ansfer Tax Amount | \$2,107.60 |
| Document Number | 2022r-03810 |
| Book | 2022 |
| Page | 3810 |
| _ | |

| DO NOT R | E-PROCESS. | Form RETTD | | Time Recorded | 01:57:00 PM |
|---|--|---|---------------------------|--|----------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$2,107.60 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-03810 |
| 2 Municipality DAT | 7T T | | | Book | 2022 |
| 2. Municipality BAT | . H | | | Page | 3810 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | REGISTRY USE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN or federal ID |
| SNYDER, LA | | | | | |
| | ne, MI; or business name | | | | 3d. SSN or federal ID |
| SNYDER, DU | | | Of Manufacturality | | 2 - Charles - 2 la 7 la Condo |
| 163 HIGH STI | r purchasing this property | | 3f. Municipality BATH | | 3g. State 3h. ZIP Code ME 04530 |
| | | | ВАТП | | WIE 04330 |
| 4. GRANTOR/SELLE | :R ne, MI; or business name | | | | 4b. SSN or federal ID |
| ROBERGE, D | | | | | is. Server leader is |
| · · | | | | | 41.001. 6.1.110 |
| 4c. Last name, mst nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 694 MIDDLE | STREET | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap | number that best descr | |
| | 40 | 3 | Multiple parce | erty being sold (see ins | structions). |
| 5c. Physical location | | | Portion of par | rcel 5c | d. Acreage (see instructions) |
| 163 HIGH STI | REET | | Not applicable | e | 0.00 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$479,000 .00 |
| | 6h Fair market value (F | inter a value only if you entered " | 'O" or a nominal value or | o line 6a) 6h | |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | |
| 6c. Exemption claim - | Check the box if either | er grantor or grantee is claiming e | exemption from transfer | tax and enter explanation below | V. |
| | | | | | |
| 7. DATE OF TRANSF | | 8. CLASSIFIED. WARNING open space, tree growth, o | | | |
| 05-25-2022 | | be triggered by developme | | · · · · · · · · · · · · · · · · · · · | CLASSIFIED |
| | | e any special circumstances | | NCOME TAX WITHHELD. T | |
| | gest the price paid was check the box and ent | either more or less than its for explanation below. | | old Maine income tax beca Seller has qualified as a Mai | |
| | | | | | from the State Tax Assessor |
| | | | | Consideration for the proper | |
| | | | | he transfer is a foreclosure | |
| | | 36 M.R.S. § 4641-K, I decla nformation contained herein | | | |
| tion provided by Gran constitutes a legal sig | . , | and of which preparer has ar | ny knowledge. I under | rstand that the submission | of an electronic form return |
| | f preparer: LYNN B | ILODEAU | Phone number | er: (207) 874-0500 | |
| Mailing address: | 70 CENTER ST | DEEE | = " | s: Lynn@mclaughlintit | le com |
| | 70 CENTER ST | REEI | Email address | s; Lymie meraugiimiti | iic.com |
| | PORTLAND, M | | Fax number: | s: Lynn@metaugminte | ic.com |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 06/02/2022 |
| Time Recorded | 02:04:00 PM |
| ransfer Tax Amount | \$400.40 |
| Document Number | 2022r-03813 |
| Book | 2022 |
| Page | 3813 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form Ri | בווט | Time Recorded | 02.04.00 I WI |
|--|----------------------------------|--|---------------------------------|---|--|
| | | Do not use | red ink. | Transfer Tax Amount | \$400.40 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-03813 |
| 2. Municipality RA7 | ri i | | | Book | 2022 |
| 2. Municipality BA | ι п | | | Page | 3813 |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| | me, MI; or business name | | | | 3b. SSN or federal ID |
| | PROPERTIES, LI | LC, | | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN or federal ID |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 239 AUBURN | STREET | | PORTLAND | | ME 04103 |
| 4. GRANTOR/SELLE | ER | | | | |
| 4a. Last name, first nar | me, MI; or business name | | | | 4b. SSN or federal ID |
| KINDLIMAN | N, BONNIE L | | | | |
| 4c. Last name, first nan | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 21 HUSE STR | REET | | BATH | | ME 04530 |
| | . Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e | |
| | 28 | 181 | No maps exist | number that best descri erty being sold (see ins | |
| 5c. Physical location | | | Multiple parce | | . Acreage (see instructions) |
| 21 HUSE STR | PEET | | Portion of pare Not applicable | | 0.15 |
| | | | | | 0.12 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$91,000 |
| | 6b. Fair market value (E | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | . 00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming ε | exemption from transfer to | ax and enter explanation below | ı. |
| | | | | | |
| 7 DATE OF TRANS | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | TO BUYER - If the p | property is classified as farn | mland. |
| 06-02-2022 | | open space, tree growth, o be triggered by developme | r working waterfront, a | a substantial financial pena | |
| 9 SPECIAL CIRCUM | MSTANCES Were then | e any special circumstances | | COME TAX WITHHELD. T | he buver is not required to |
| the transfer that sugg | gest the price paid was | either more or less than its f | | old Maine income tax becau | |
| market value? II yes | , check the box and ent | er explanation below. | | eller has qualified as a Mai | ne resident from the State Tax Assessor |
| | | | | onsideration for the propert | |
| | | | Т | he transfer is a foreclosure | sale |
| | | 36 M.R.S. § 4641-K, I decla | | | |
| tion provided by Gran | ntor(s) and Grantee(s) | nformation contained herein and of which preparer has ar | | | |
| constitutes a legal significant constitutes a legal significan | gnature. of preparer: MAINE T | TITLE SERVICES, LLC | Phone numbe | r: (207) 781-7400 | |
| Mailing address: | 361 US ROUTE | | | info@mainetitleservi | ces.com |
| mailing address. | FALMOUTH, N | | | , | |
| | 17121/100111, 11 | 11.01105 | Fax number:_ | | Rev. 11/18 |

PROCESSED

DLN: 1002240195838

MAINE REAL ESTATE

| Registry | SAGADAHOC |
|------------------|-------------|
| Date Recorded | 06/02/2022 |
| Time Recorded | 02:04:00 PM |
| isfer Tax Amount | \$0.00 |
| ocument Number | 2022r-03812 |
| Book | 2022 |
| - | |

| ONLINE. | IRANSFER IAX D | | Date recorded | 02:04:0 | 0 DM |
|---|---|---|---|---|----------------|
| DO NOT RE-PROCESS. | Form RI Do not use | | Time Recorded Transfer Tax Amount | \$0.00 | O F IVI |
| 1. County SAGADAHOC | | | Document Number | 2022r-0 | 3812 |
| 1. County SAGADAHOC | | | Book | 2022 | 2012 |
| 2. Municipality BATH | | | Page | 3812 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - F | | SE ONLY |
| 3a. Last name, first name, MI; or business name | | | | | or federal ID |
| KINDLIMANN, BONNIE | | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN c | or federal ID |
| | | | | | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 21 HUSE STREET | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN o | r federal ID |
| CHADWICK, ADAM | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN o | r federal ID |
| CHADWICK, BRITTANY | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 18 HUSE STREET | | BATH | | ME | 04530 |
| 5. PROPERTY 5a. Map Block 28 | Lot Sub-lot | Check any that ap No maps exis Multiple parce | number that best desc erty being sold (see in: | ribes the prop- structions). | 201 |
| 5c. Physical location 21 HUSE STREET | | X Portion of par | | d. Acreage (see 0.15 | instructions) |
| 21 HUSE STREET | | тот аррпсави | · | 0.13 | |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$0 | . 00 |
| 6b. Fair market value (Er | nter a value only if you entered " | 0" or a nominal value on | ı line 6a) 6b. | \$5,000 | . 00 |
| 6c. Exemption claim - χ Check the box if either | r grantor or grantee is claiming e | exemption from transfer | tax and enter explanation belo | w. | |
| DEED FROM ABUTTER TO C | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 05-31-2022 | 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme | r working waterfront, | a substantial financial pena | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was a market value? If yes, check the box and enter the transfer that suggest the price paid was a market value? | either more or less than its f | air withh X S A | NCOME TAX WITHHELD. Told Maine income tax becaseller has qualified as a Max waiver has been received Consideration for the proper | use: ine resident from the Stat rty is less thar | e Tax Assessor |
| 4.00 | 2011 D 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | he transfer is a foreclosure | | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the intion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. PREPARER. Name of preparer: MAINE T | formation contained herein and of which preparer has ar | is true, correct and cony knowledge. I under | omplete. Declaration of pre | parer is based | d on informa- |
| 244 110 0 01 1111 | | | s: info@mainetitleserv | ices com | |
| Mailing address: 361 US ROUTE FALMOUTH, M | | | s,into @ manicuticset v | iccs.com | |
| FALMOUTH, W | IL 04103 | Fax number:_ | | | . 11/10 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------------|
| Date Recorded | 06/06/2022 |
| Time Recorded | 01:58:00 PM |
| ansfer Tax Amount | \$2,662.00 |
| Document Number | 2022r-03874 |
| Book | 2022 |
| Page | 3874 |
| | ECISTRY LISE ONLY |

| DO NOT RE-PROCESS. | Form RE | TTD | Time Recorded | 01:58:00 PM |
|--|--|---------------------------------|---|------------------------------|
| | Do not use re | ed ink. | Transfer Tax Amount | \$2,662.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-03874 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 3874 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| MCKAY, KATHERINE A | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| STAHL, DAVID A | | | | |
| 3e. Mailing address after purchasing this property | 3 | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 2 RANGER CIRCLE | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| DUNNING, LISA H | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| DUNNING, THURLOW R | | | | |
| 4e. Mailing address | 4 | 1f. Municipality | | 4g. State 4h. ZIP Code |
| 2 RANGER CIRCLE | | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that app | oly 5b. Type of property - e | enter the code |
| 23 | 020 | No maps exist | number that best descr erty being sold (see ins | |
| 5c. Physical location | | Multiple parcel | | . Acreage (see instructions) |
| 2 RANGER CIRCLE | | Portion of parc Not applicable | | 5.10 |
| | | | | 3.10 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$605,000 .00 |
| 6b. Fair market value (Er | nter a value only if you entered "0" | or a nominal value on I | ine 6a) 6b. | ■00 |
| | | | | |
| 6c. Exemption claim - Check the box if either | grantor or grantee is claiming exe | empuon nom transier ta | x and enter explanation below | <i>.</i> . |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, or was a special control of the space. | | | |
| 06-03-2022 | be triggered by development | | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | · · | | | he buyer is not required to |
| the transfer that suggest the price paid was a market value? If yes, check the box and enter | | | ld Maine income tax becau eller has qualified as a Mai | |
| | | 4. | • | from the State Tax Assessor |
| | | Co | onsideration for the proper | ty is less than \$50,000 |
| | | Th | e transfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the intion provided by Grantor(s) and Grantee(s) a | formation contained herein is | true, correct and cor | mplete. Declaration of prep | parer is based on informa- |
| constitutes a legal signature. | | | | |
| PREPARER. Name of preparer: MATHIEU | U DEKUBE | Phone number | (207) 622-5801 | |
| Mailing address:150 STATE STR | REET | Email address: | Loans@kennebecsav | rings.bank |
| AUGUSTA, ME | 04330 | Fax number: | | |
| | | | | Rev. 11/18 |

PROCESSED

DLN: 1002240197097

MAINE REAL ESTATE

| Registry | SAGADAHOC |
|----------------|-------------|
| Date Recorded | 06/09/2022 |
| Time Recorded | 02:17:00 PM |
| fer Tax Amount | \$0.00 |
| cument Number | 2022r-03957 |
| | |

| | IL. | Form RE | CLARATION | Time Recorded | 02:17:00 PM | |
|--|--|---|--|--|---|--|
| DO NOT RE-PI | ROCESS. | Do not use re | | Transfer Tax Amount | Φ0.00 | |
| 1. County SAGADAI | HOC | | | Document Number | | 3957 |
| SAGADAI | нос | | | Book | 2022 | |
| 2. Municipality BATH | | | | Page | 3957 | |
| 3. GRANTEE/PURCHASE | R | | | BOOK/PAGE - I | REGISTRY US | SE ONLY |
| 3a. Last name, first name, MI; | or business name | | | | 3b. SSN o | or federal ID |
| KINGSBURY, SEI | | | | | 21.221 | 6 1 115 |
| 3c. Last name, first name, MI; | or business name | | | | 3d. SSN 0 | or federal ID |
| 3e. Mailing address after purch | nasing this property | ; | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 14 BAILEY STRE | ET | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLER 4a. Last name, first name, MI; MOODIE, TIMOT | | | | | 4b. SSN o | r federal ID |
| 4c. Last name, first name, MI; o | or Business name | | | | 4d. SSN o | r federal ID |
| 4e. Mailing address | | 4 | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 2085 W. WHISKE | Y RUN ROAD N | W | RAMSEY | | IN | 47186 |
| 5. PROPERTY 5a. Map 25 5c. Physical location | o Block | Lot Sub-lot 135 | Check any that ap No maps exis Multiple parce | number that best desc erty being sold (see in | cribes the prop- structions). | 202 instructions) |
| 14 BAILEY STRE | ET | | Portion of par Not applicable | | 0.08 | , |
| 14 BAILEY STRE | | er is a gift enter "0") | Not applicable | 9 | 0.08 | |
| 14 BAILEY STRE | Purchase price (If the transfe | | Not applicable | 6a. | 0.08 | . 00 |
| 14 BAILEY STRE | Purchase price (If the transfe | alue only if you entered "0" | Not applicable | 6a. line 6a) 6b. | \$0 \$155,000 | .00 |
| 14 BAILEY STRE | Purchase price (If the transferair market value (Enter a value) | alue only if you entered "0" | Not applicable or a nominal value on emption from transfer t | line 6a) 6b. ax and enter explanation belo | \$0 \$155,000 | .00 |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch | Purchase price (If the transferair market value (Enter a value) heck the box if either granto BETWEEN SPOU MM-DD-YYYY) 8. CL/open | alue only if you entered "0" or or grantee is claiming ex | Not applicable or a nominal value on emption from transfer t T TO DIVORO TO BUYER - If the p working waterfront, a | line 6a) | 0.08 \$0 \$155,000 w. | .00 |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch CONVEYANCE B 7. DATE OF TRANSFER (N | Purchase price (If the transfer a value (Enter a value the box if either granto BETWEEN SPOUMM-DD-YYYY) 8. CLA open be trigous control of the control of th | alue only if you entered "0" or or grantee is claiming ex SES PURSUAN ASSIFIED. WARNING space, tree growth, or or gered by development pecial circumstances was more or less than its fai | Not applicable or a nominal value on emption from transfer to T TO DIVORO TO BUYER - If the powerking waterfront, as subdivision, partition with 10. IN r withhole | line 6a) | 0.08 \$0 \$155,000 w. The buyer is nause: aine resident | LOO CLASSIFIED ot required to |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch CONVEYANCE B 7. DATE OF TRANSFER (N 06-03-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest the | Purchase price (If the transfer a value (Enter a value) the ck the box if either granto BETWEEN SPOUMM-DD-YYYY) 8. CLA open be trigon to be trigon to be trigon to price paid was either rick the box and enter explain. | alue only if you entered "0" or or grantee is claiming ex SES PURSUAN ASSIFIED. WARNING space, tree growth, or viggered by development pecial circumstances with more or less than its fail anation below. X | Not applicable or a nominal value on emption from transfer to TO DIVORO TO BUYER - If the pworking waterfront, and subdivision, partition in the pworking water from the pwo | line 6a) | 0.08 \$0 \$155,000 w. The buyer is nause: aine resident I from the Staterty is less than | CLASSIFIED ot required to |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch CONVEYANCE B 7. DATE OF TRANSFER (N 06-03-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th market value? If yes, check CONVEYANCE B 11. OATH. Aware of penaltit to the best of my knowledge tion provided by Grantor(s) constitutes a legal signature | Purchase price (If the transfer and price (If the transfer and price) and price (If the transfer and price) and price and belief the informatical and Grantee(s) and of view of the price and price | alue only if you entered "0" or or grantee is claiming ex ISES PURSUAN ASSIFIED. WARNING space, tree growth, or or gered by development pecial circumstances we more or less than its fair anation below. X ISES PURSUAN R.S. § 4641-K, I declared tion contained herein is which preparer has any | Not applicable or a nominal value on emption from transfer to T TO DIVORO TO BUYER - If the power transfer to that I have reviewed true, correct and content to the power of the power true to the power true true true true true true true tr | line 6a) | 0.08 \$0 \$155,000 w. The buyer is nause: aine resident I from the Statirty is less than e sale ator(s) and Graparer is based | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch CONVEYANCE B 7. DATE OF TRANSFER (N 06-03-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest the market value? If yes, check CONVEYANCE B 11. OATH. Aware of penaltit to the best of my knowledge tion provided by Grantor(s) constitutes a legal signature PREPARER. Name of preparations. | Purchase price (If the transfer and see the box if either granton be trice) MM-DD-YYYY) 8. CL/Open be trice NCES. Were there any see price paid was either received the box and enter explaints as set forth in 36 M.F. e and belief the information and Grantee(s) and of vecarer: JAMES HOPKI | alue only if you entered "0" or or grantee is claiming ex ISES PURSUAN ASSIFIED. WARNING space, tree growth, or or gered by development pecial circumstances we more or less than its fair anation below. X ISES PURSUAN R.S. § 4641-K, I declared tion contained herein is which preparer has any INSON | Not applicable or a nominal value on emption from transfer to the property of | line 6a) | \$0.08 \$155,000 w. The buyer is nause: sine resident I from the State rty is less than e sale stor(s) and Gra | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |
| 6. TRANSFER TAX 6a. P 6b. F 6c. Exemption claim - X Ch CONVEYANCE B 7. DATE OF TRANSFER (N 06-03-2022 9. SPECIAL CIRCUMSTAN the transfer that suggest th market value? If yes, check CONVEYANCE B 11. OATH. Aware of penaltit to the best of my knowledge tion provided by Grantor(s) constitutes a legal signature PREPARER. Name of preparations and p | Purchase price (If the transfer and price (If the transfer and price) and price (If the transfer and price) and price and belief the informatical and Grantee(s) and of view of the price and price | alue only if you entered "0" or or grantee is claiming ex ISES PURSUAN ASSIFIED. WARNING space, tree growth, or viggered by development pecial circumstances with more or less than its fair anation below. X ISES PURSUAN R.S. § 4641-K, I declared the contained herein is which preparer has any INSON | Not applicable or a nominal value on emption from transfer to the property of | line 6a) | \$0.08 \$155,000 w. The buyer is nause: sine resident I from the State rty is less than e sale stor(s) and Gra | CLASSIFIED ot required to e Tax Assessor a \$50,000 antee(s) and d on informa- |

| Registry | SAGADAHOC |
|---------------------|------------------|
| Date Recorded | 06/13/2022 |
| Time Recorded | 09:26:00 AM |
| Transfer Tax Amount | \$499.40 |
| Document Number | 2022r-04000 |
| Book | 2022 |
| Page | 4000 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. Form RETTD | | Time Recorded | | 09:26:00 AM | |
|---|--|--|---|--|-------------------------------|
| Do not use red ink. | Tra | ansfer Tax Amo | ınt \$499 | 0.40 | |
| 1. County SAGADAHOC | 1 | Document Numb | per | 2r-04000 | |
| 2. Municipality BATH | | Во | ok | | |
| BAIII | | Pa | ge 4000 |) | |
| 3. GRANTEE/PURCHASER | | BOOK/PAG | E - REGISTR | Y USE ONL | Υ |
| 3a. Last name, first name, MI; or business name | | | 3b. S | SSN or federa | I ID |
| BEAUMONT, AARON | | | | | |
| 3c. Last name, first name, MI; or business name | | | 30. S | SN or federal | ID |
| 3e. Mailing address after purchasing this property 3f. Municip | pality | | 3g. S | tate 3h. ZIP | Code |
| 431 BLECKER STREET, APT 2R BRO | OKLYN | | N | Y 112 | 37 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | | | 4b. S | SN or federal | ID |
| LARSSEN, LAURA K | | | | | |
| 4c. Last name, first name, MI; or Business name | | | 4d. S | SN or federal | ID |
| | | | | | |
| 4e. Mailing address 4f. Municip | nality | | 4g. S | tate 4h. ZIP | Code |
| 7 MILL POND DRIVE BATI | | | M | | |
| | ck any that apply | 5b. Type of prope | | | |
| | | number that best | describes the p | rop- |) |
| 29 | No maps exist Multiple parcels | erty being sold (se | e instructions). | 202 | |
| N | No maps exist Multiple parcels Portion of parcel | erty being sold (se | · | (see instruction | |
| 5c. Physical location P | Multiple parcels | erty being sold (se | · | | |
| 5c. Physical location P | Multiple parcels Portion of parcel Not applicable | | 5d. Acreage | | ons) |
| 5c. Physical location PRIVE NILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable | 6a. | 5d. Acreage 0.00 \$0 | (see instruction | •00 |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable | 6a. Sa)6b. | 5d. Acreage 0.00 \$0 \$226, | (see instruction | ons) |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable ininal value on line 6 | 6a. ia)6b. d enter explanation | 5d. Acreage 0.00 \$0 \$226, below. | (see instruction | .00 .00 |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable ininal value on line 6 | 6a. ia)6b. d enter explanation | 5d. Acreage 0.00 \$0 \$226, below. | (see instruction | .00 .00 |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Nultiple parcels Portion of parcel Not applicable ninal value on line 6 rom transfer tax and ITLE; TAX ER - If the prope waterfront, a sub | | 5d. Acreage 0.00 \$0 \$226, below. OF THE F. | (see instruction | .00 .00 .00 RKET VAI |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Nultiple parcels Portion of parcel Not applicable Initial value on line 6 rom transfer tax and ITLE; TAX ER - If the prope waterfront, a subsision, partition, of | d enter explanation ON HALF (orty is classified asstantial financial or change in use. | \$0.00 \$0 \$226, below. DF THE F. a farmland, benalty may | 976 AIR MA | .00 .00 RKET VAI |
| 5c. Physical location 3 MILL POND DRIVE 6a. Purchase price (If the transfer is a gift, enter "0") | Nultiple parcels Portion of parcel Not applicable Initial value on line 6 ITLE; TAX ER - If the prope waterfront, a subsision, partition, or 10. INCOM withhold M | | \$0.00 \$0 \$226, below. DF THE F. s farmland, penalty may D. The buyer pecause: | 976 AIR MA CLASS | .00 .00 RKET VAI |
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| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable Initial value on line 6 rom transfer tax and ITLE; TAX ER - If the prope waterfront, a subsision, partition, or 10. INCOM withhold M Seller A waiv Consider The transfer tax and completed and completed ge. I understand | denter explanation ON HALF (orty is classified as a stantial financial or change in use. The TAX WITHHEL aine income tax to the second of the pransfer is a foreclost return with the Coste. Declaration of the that the submission. | \$0.00 \$0 \$226, below. DF THE F. s farmland, benalty may D. The buyer because: Maine reside ved from the operty is less sure sale Grantor(s) and preparer is b | 976 AIR MA CLASS is not requirent State Tax Asthan \$50,00 | and orma- |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Nultiple parcels Portion of parcel Not applicable Initial value on line 6 ITLE; TAX ER - If the prope waterfront, a subsision, partition, or initial value on line of the properties of the p | denter explanation ON HALF (orty is classified as a stantial financial or change in use. The TAX WITHHEL aine income tax to the second of the pransfer is a foreclost return with the Coste. Declaration of the that the submission. | \$0.00 \$0 \$226, below. DF THE F. s farmland, benalty may D. The buyer because: Maine reside ved from the operty is less sure sale Grantor(s) and preparer is b | 976 AIR MA CLASS is not requirent State Tax Asthan \$50,00 | and orma- |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable Minal value on line 6 From transfer tax and ITLE; TAX ER - If the prope waterfront, a subsision, partition, or withhold M Seller A waiv Consider the transfer tax and completed and completed ge. I understand to the proper tax and completed the parcel tax and completed and completed the parcel tax and completed tax an | denter explanation ON HALF (orty is classified as a stantial financial or change in use. The TAX WITHHEL aine income tax to the second of the pransfer is a foreclost return with the Coste. Declaration of the that the submission. | \$0.00 \$0 \$226, below. DF THE F. c farmland, benalty may D. The buyer because: Maine reside ved from the operty is less sure sale Grantor(s) and preparer is b dion of an elect | 976 AIR MA CLASS is not requirent State Tax Asthan \$50,00 I Grantee(s) ased on infoctronic form | and orma- |
| 5c. Physical location 3 MILL POND DRIVE 6. TRANSFER TAX 6a. Purchase price (If the transfer is a gift, enter "0") | Multiple parcels Portion of parcel Not applicable Minal value on line 6 From transfer tax and ITLE; TAX ER - If the prope waterfront, a subsision, partition, or withhold M Seller A waiv Consider the transfer tax and completed and completed ge. I understand to the proper tax and completed the parcel tax and completed and completed the parcel tax and completed tax an | d enter explanation ON HALF (orty is classified as a stantial financial r change in use. ME TAX WITHHEL aine income tax is that qualified as a ser has been recederation for the pransfer is a foreclost return with the Cete. Declaration of that the submission (207) 899-4900 | \$0.00 \$0 \$226, below. DF THE F. c farmland, benalty may D. The buyer because: Maine reside ved from the operty is less sure sale Grantor(s) and preparer is b dion of an elect | 976 AIR MA CLASS is not requirent State Tax Asthan \$50,00 I Grantee(s) ased on infoctronic form | and orma- |

PROCESSED MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC Date Recorded 06/13/2022

| DO NOT RE- | INE. -PROCESS. | Form Ri | | Time Reco | ф1.26 | 00 PM |
|---|--|---|--|--|---|--|
| 1. County SAGAD | AHOC | | | Document Nur | | 04012 |
| 1. County SAGAD | ОАНОС | | | 100000000000000000000000000000000000000 | 300k 2022 | |
| 2. Municipality BATH | I | | | | Page 4012 | |
| 3. GRANTEE/PURCHA | SER | | | | GE - REGISTRY | JSE ONLY |
| 3a. Last name, first name, | | | | ` | 3b. SS | N or federal ID |
| 357 GERALD L | LC, | | | | | |
| 3c. Last name, first name, | MI; or business name | | | | 3d. SSN | l or federal ID |
| O. Mallin and during a firm | | | Of Manufata alter | | 0 04 | . 01: 71D 0 : 1: |
| 3e. Mailing address after po | | PTT | 3f. Municipality | | 3g. Stat | |
| 454 OLD CONN | NECTICUT PAI | П | WAYLAND | 1 | MA | 01778 |
| GRANTOR/SELLER Last name, first name, | MI: or business name | | | | 4b. SSN | or federal ID |
| MLCU HOLDIN | | | | | 13. 33. | 01100010112 |
| | • | | | | 44.000 | Lea feeless LID |
| 4c. Last name, first name, I | ivii, or Business name | | | | 4a. 55N | or federal ID |
| | | | | | | |
| 4e. Mailing address | ON CE | | 4f. Municipality | | 4g. Stat | |
| 79 RICHARDSO | ON ST | | BATH | | ME | 04530 |
| 5. PROPERTY 5a. 1 | Map Block | Lot Sub-lot 130 | Check any that a | number that be | perty - enter the code of describes the propertions (| |
| | | 130 | Multiple par | erty being solu | (See man denoma). | |
| 5c. Physical location | | 130 | | cels | , | ee instructions) |
| | | 130 | Multiple pare | cels | , | ee instructions) |
| 5c. Physical location 3 GERALD ST | | transfer is a gift, enter "0") | Multiple pare Portion of pa Not applicat | cels arcel | 5d. Acreage (s | |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 | sa. Purchase price (If the | | Multiple pard Portion of pa Not applicat | erty being sold bels arcel ble 6a. | 5d. Acreage (s 0.00 | |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 | sa. Purchase price (If the sb. Fair market value (En | transfer is a gift, enter "0") | Multiple pard Portion of pard Not applicate O" or a nominal value of | erty being sold bels arcel ble 6a. n line 6a) | 5d. Acreage (s 0.00 \$310,0 | 00 .00 |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 | sa. Purchase price (If the sb. Fair market value (En | transfer is a gift, enter "0") ter a value only if you entered " | Multiple pard Portion of pard Not applicate O" or a nominal value of | erty being sold bels arcel ble 6a. n line 6a) | 5d. Acreage (s 0.00 \$310,0 | 00 .00 |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 | ia. Purchase price (If the ib. Fair market value (En Check the box if either ib. (MM-DD-YYYY) | transfer is a gift, enter "0")ter a value only if you entered " grantor or grantee is claiming e | Multiple pard Portion of part Not applicate "o" or a nominal value of exemption from transfer | rely being sold being | 5d. Acreage (s 0.00 \$310,00 on below. | 00 .00 |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - | ia. Purchase price (If the ib). Fair market value (En Check the box if either ib). R (MM-DD-YYYY) | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e | Multiple pard Portion of part Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the reworking waterfront | rely being sold being | 5d. Acreage (s 0.00 \$310,00 on below. as farmland, al penalty may | 00 .00 |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges | Sa. Purchase price (If the Sb. Fair market value (En Check the box if either R (MM-DD-YYYY) TANCES. Were there st the price paid was e | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances ither more or less than its for | Multiple pard Portion of part Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the reworking waterfront ont, subdivision, parti with 10. I | rely being sold being | 5d. Acreage (s 0.00 \$310,00 on below. as farmland, all penalty may | 00 .00 .00 .00 .00 |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS | Sa. Purchase price (If the Sb. Fair market value (En Check the box if either R (MM-DD-YYYY) TANCES. Were there st the price paid was e | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances ither more or less than its for | Multiple pare Portion of pare Not applicate "" or a nominal value of exemption from transfer E TO BUYER - If the report working waterfront int, subdivision, particular with 10. If the pare of the | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as | 5d. Acreage (s 0.00 \$310,00 as farmland, al penalty may ELD. The buyer is a because: | 00 .00 .00 CLASSIFIED not required to |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges | Sa. Purchase price (If the Sb. Fair market value (En Check the box if either R (MM-DD-YYYY) TANCES. Were there st the price paid was e | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances ither more or less than its for | Multiple pare Portion of pare Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the report working waterfront int, subdivision, particular with 10.1 | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as A waiver has been recome. | 5d. Acreage (s 0.00 \$310,00 an below. as farmland, al penalty may ELD. The buyer is a because: a Maine resident beived from the St | CLASSIFIED not required to ate Tax Assessor |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges | Sa. Purchase price (If the Sb. Fair market value (En Check the box if either R (MM-DD-YYYY) TANCES. Were there st the price paid was e | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances ither more or less than its for | Multiple pard Portion of part Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the reworking waterfront ont, subdivision, parti with 10. I with | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as | 5d. Acreage (s 0.00 \$310,00 an below. as farmland, al penalty may ELD. The buyer is a because: a Maine resident beived from the St property is less th | CLASSIFIED not required to ate Tax Assessor |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges market value? If yes, ch | ia. Purchase price (If the indicate in the inference of t | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances wither more or less than its for explanation below. 66 M.R.S. § 4641-K, I declate formation contained herein and of which preparer has an | Multiple pard Portion of part Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the revoking waterfront and, subdivision, parti with 10. I with air with | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as A waiver has been reconsideration for the The transfer is a forecast to the complete. Declaration erstand that the subminerstand that the submin | 5d. Acreage (s 0.00 \$310,00 son below. as farmland, all penalty may because: a Maine resident belowed from the St property is less the closure sale a Grantor(s) and G of preparer is bas ssion of an electron | CLASSIFIED not required to ate Tax Assessor an \$50,000 crantee(s) and ed on informa- |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges market value? If yes, ch | ia. Purchase price (If the indicate in the inference of t | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances wither more or less than its for explanation below. 66 M.R.S. § 4641-K, I declate formation contained herein and of which preparer has an | Multiple pard Portion of part Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the revoking waterfront and, subdivision, parti with 10. I with air with | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as A waiver has been reconsideration for the The transfer is a forecast ded this return with the complete. Declaration | 5d. Acreage (s 0.00 \$310,00 son below. as farmland, all penalty may because: a Maine resident belowed from the St property is less the closure sale a Grantor(s) and G of preparer is bas ssion of an electron | CLASSIFIED not required to ate Tax Assessor an \$50,000 crantee(s) and ed on informa- |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges market value? If yes, ch | ia. Purchase price (If the indicate in the inference of t | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, of be triggered by development any special circumstances wither more or less than its for r explanation below. 66 M.R.S. § 4641-K, I declate formation contained herein and of which preparer has an | Multiple pare Portion of pare Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the received and the content of the content o | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as A waiver has been reconsideration for the The transfer is a forecast to the complete. Declaration erstand that the subminerstand that the submin | 5d. Acreage (s 0.00 \$310,00 son below. as farmland, all penalty may ELD. The buyer is a because: a Maine resident the St property is less the closure sale a Grantor(s) and Gof preparer is bassion of an electron | CLASSIFIED not required to ate Tax Assessor an \$50,000 crantee(s) and ed on informa- |
| 5c. Physical location 3 GERALD ST 6. TRANSFER TAX 6 6c. Exemption claim - 7. DATE OF TRANSFER 06-10-2022 9. SPECIAL CIRCUMS the transfer that sugges market value? If yes, ch | ia. Purchase price (If the interpretation) Check the box if either Check the box if either R (MM-DD-YYYY) TANCES. Were there at the price paid was eneck the box and enterprice and belief the interpretation of the interpretation. It is not considered to the price and belief the interpretation. It is not considered to the interpretation. It is not considered to the interpretation. | transfer is a gift, enter "0") ter a value only if you entered " grantor or grantee is claiming e 8. CLASSIFIED. WARNING open space, tree growth, o be triggered by developme any special circumstances ither more or less than its fi r explanation below. 66 M.R.S. § 4641-K, I decla formation contained herein and of which preparer has an RSE | Multiple pare Portion of pare Not applicate O" or a nominal value of exemption from transfer E TO BUYER - If the received and the content of the content o | property is classified a substantial financiation, or change in use NCOME TAX WITHHI hold Maine income tax Seller has qualified as A waiver has been reconsideration for the The transfer is a forecast this return with the complete. Declaration erstand that the submiter: (207) 333-3626 as: jodi@treworgy | 5d. Acreage (s 0.00 \$310,00 son below. as farmland, all penalty may ELD. The buyer is a because: a Maine resident the St property is less the closure sale a Grantor(s) and Gof preparer is bassion of an electron | CLASSIFIED not required to ate Tax Assessor an \$50,000 crantee(s) and ed on informa- |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------------|
| Date Recorded | 06/13/2022 |
| Time Recorded | 02:23:00 PM |
| ansfer Tax Amount | \$4,158.00 |
| Document Number | 2022r-04030 |
| Book | 2022 |
| Page | 4030 |
| POOK/DACE D | EGISTRY LISE ONLY |

| DO NOT RE-PROCESS. | Form RET | | Time Recorded | 02:23:00 PM |
|--|--|-----------------------------------|--|--|
| | Do not use red | Ink. | ansfer Tax Amount | \$4,158.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-04030 |
| 2. Municipality BATH, BATH | | | Book | 2022 |
| , | | | Page _ | 4030 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| CONROY, MELANIE A | | | | 2d CCN on fodoval ID |
| 3c. Last name, first name, MI; or business name NTONME, SAMUEL KOUAM | IOU | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | | Municipality | | 3g. State 3h. ZIP Code |
| 1082 CENTRE STREET | | NEWTON | | MA 02459 |
| | 1 | VEW TOTA | | WITT 02+37 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| BANKS LIVING TRUST, | | | | |
| | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | 4f. l | Municipality | | 4g. State 4h. ZIP Code |
| 40 WHISKEAG ROAD | I | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that apply | 5b. Type of property - e number that best descri | iban the prop |
| 15 | 46 | No maps exist X Multiple parcels | erty being sold (see ins | tructions). |
| 5c. Physical location | | Portion of parcel | 5d | . Acreage (see instructions) |
| 40 WHISKEAG ROAD | | Not applicable | | 38.39 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$945,000 .00 |
| Ch. Fair market value (F | ntor a value and if you entered "O" on | a naminal valua an lina | Go) Gh | |
| | nter a value only if you entered "0" or | | | ■00 |
| 6c. Exemption claim - Check the box if eithe | r grantor or grantee is claiming exem | ption from transfer tax a | nd enter explanation below | l. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING TO | | | |
| 06-10-2022 | open space, tree growth, or wo be triggered by development, s | | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | e any special circumstances with | | | he buyer is not required to |
| the transfer that suggest the price paid was market value? If yes, check the box and enter | | | Maine income tax becau | |
| market value. If yee, oneon the box and one | or explanation below. | 4. | has qualified as a Main | ne resident from the State Tax Assessor |
| | | | deration for the propert | |
| | | The to | ansfer is a foreclosure | sale |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ir tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | nformation contained herein is tru | ue, correct and compl | ete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of preparer: CARLY J | | | | |
| | OYCE | Phone number: _(| 207) 761-7277 | |
| | OYCE LVD SUITE 204 | | 207) 761-7277 earlys@tlsettlement.c | com |
| OFO DAVIETO D | LVD SUITE 204 | | | Com |

MAINE REVENUE SERVICES SUPPLEMENT TO THE REAL ESTATE TRANSFER TAX FORM

This form is to be used in conjunction with the Real Estate Transfer Tax Form and provides additional information when necessary.

Please attach this form to the original transfer tax form before submitting to the County Registry of Deeds.

Use additional forms as necessary.

If you have any questions, please contact the property Tax Division at 207-287-2013 or e-mail: prop.tax@maine.gov.

| Additional Grantees/Purchasers – Last Name First | Social Security or Fed. ID # |
|--|------------------------------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| Additional Grantors/Sellers – Last Name First | Social Security or Fed. ID # |
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. _ | |
| 6. | |
| 7. | |
| 8. | |

| Additional Municipalities | Map—Block—Lot—Sub-Lot | |
|---------------------------|-----------------------|---|
| 1. BATH | 15 - 46 - | 1 |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |
| 8. | | |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 06/15/2022 |
| Time Recorded | 12:48:00 PM |
| ransfer Tax Amount | \$1,188.00 |
| Document Number | 2022r-04114 |
| Book | 2022 |
| Page | 4114 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RI | E-PROCESS. | Form RI | ETTD | Time Recorded | 12:48:00 PM |
|--|---|---|--------------------------------|--|--|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,188.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04114 |
| 2 Municipality DATE | T T | | | Book | 2022 |
| 2. Municipality BAT | H | | | Page | 4114 |
| 3. GRANTEE/PURCH | IASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name | | | | | 3b. SSN or federal ID |
| | UKEHART, ER | ICA | | | |
| 3c. Last name, first name | e, MI; or business name CHRISTOPHER | 0 | | | 3d. SSN or federal ID |
| 3e. Mailing address after | | . Q. | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 51 HOFFMAN | | | SARATOGA | SPRINGS | NY 12866 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name | | | | | 4b. SSN or federal ID |
| NELSON, ROE | BERT J. | | | | |
| 4c. Last name, first name | e, MI; or Business name | | | | 4d. SSN or federal ID |
| NELSON, JAN | ICE R. | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 1 GOOSE COV | E ROAD | | BATH | | ME 04530 |
| | Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e | enter the code |
| | 1 | 25 | No maps exist | number that best descri erty being sold (see ins | |
| 5c. Physical location | | | Multiple parce Portion of parc | | . Acreage (see instructions) |
| | PS POINT ROA | AD. | Not applicable | | 2.90 |
| 6. TRANSFER TAX | | | | | |
| | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$269,900 |
| | 6b. Fair market value (Ei | nter a value only if you entered " | 0" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if eithe | r grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | J. |
| | | | | | |
| 7. DATE OF TRANSFI | ER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | G TO BUYER - If the p | property is classified as farn | mland, |
| 06-15-2022 | , | open space, tree growth, o be triggered by developme | | | lty may CLASSIFIED |
| 9. SPECIAL CIRCUMS | STANCES. Were there | e any special circumstances | with 10. IN | COME TAX WITHHELD. T | he buyer is not required to |
| the transfer that sugger market value? If yes, or | est the price paid was | either more or less than its f | air withho | old Maine income tax becau | |
| market value. Il yes, c | shook the box and one | or explanation below. | | eller has qualified as a Mai waiver has been received | ne resident from the State Tax Assessor |
| | | | | onsideration for the propert | |
| | | | TI | he transfer is a foreclosure | sale |
| to the best of my know | rledge and belief the ir for(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla formation contained herein ind of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of | | VOORHEES, JR. | Phone numbe | r: (207) 729-1667 | |
| Mailing address: _ | 13 PLEASANT | STREET | Email address | ewhite@midcoasttitle | e.com |
| _ | BRUNSWICK, | ME 04011 | Fax number:_ | | |
| _ | | | | | Rov 11/18 |

PROCESSED

| Registry | SAGADAHOC |
|------------------|-------------|
| Date Recorded | 06/16/2022 |
| Time Recorded | 12:25:00 PM |
| nsfer Tax Amount | \$7,040.00 |
| Document Number | 2022r-04151 |
| Book | 2022 |
| Page | 4151 |
| | |

| DO NOT RE-PROCESS. Form | Form RETTD | | 12:25:00 PM |
|---|-----------------------------|--|------------------------------|
| | ise red ink. | Transfer Tax Amount | \$7,040.00 |
| 1. County SAGADAHOC | | Document Number | 2022r-04151 |
| | | Book | 2022 |
| 2. Municipality BATH | | Page | 4151 |
| 3. GRANTEE/PURCHASER | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | 3b. SSN or federal ID |
| DAVENPORT, LESLIE | | | |
| 3c. Last name, first name, MI; or business name DAVENPORT, WILLIAM | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 59 W CHOPS POINT ROAD | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | |
| 4a. Last name, first name, MI; or business name | | | 4b. SSN or federal ID |
| ELLIOT M. ZIMMERMAN LIVING TRUST, | | | |
| 4c. Last name, first name, MI; or Business name | | | 4d. SSN or federal ID |
| ROSLYN H. ZIMMERMAN LIVING TRUST, | | | |
| 4e. Mailing address | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 59 W CHOPS POINT ROAD | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Block Lot Sub-l | lot Check any tha | | |
| 01 012 | No maps e | erty being sold (see ins | |
| 5c. Physical location | Multiple pa | | . Acreage (see instructions) |
| 59 W CHOPS POINT ROAD | Not applic | | 2.90 |
| 6. TRANSFER TAX | | | h4 400 000 |
| 6a. Purchase price (If the transfer is a gift, enter "0") |) | oa. | \$1,600,000 |
| 6b. Fair market value (Enter a value only if you ente | ered "0" or a nominal value | e on line 6a) 6b. | ■00 |
| 6c. Exemption claim - Check the box if either grantor or grantee is claim | ning exemption from trans | fer tax and enter explanation below | I. |
| | | | |
| 7. DATE OF TRANSPER (MINI DD 1111) | | ne property is classified as farm | |
| 116 16 (11/1) | • | nt, a substantial financial pena rtition, or change in use. | lty may CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there any special circumstant | | . INCOME TAX WITHHELD. T | |
| the transfer that suggest the price paid was either more or less than market value? If yes, check the box and enter explanation below. | | thhold Maine income tax becau | |
| | X | Seller has qualified as a Mai A waiver has been received | |
| | | Consideration for the propert | • |
| | | The transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I d to the best of my knowledge and belief the information contained her tion provided by Grantor(s) and Grantee(s) and of which preparer has constitutes a legal signature. | rein is true, correct and | d complete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of preparer: MOLLY LITZ | Phone nun | nber: (207) 699-7500 Ext | |
| Mailing address: 217 COMMERCIAL STREET #304 | | | |
| | Email addr | ress: molly@foresidetitle. | com |

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DLN: _1002240198117

| Registry | SAGADAHOC |
|-------------------|-------------|
| Date Recorded | 06/17/2022 |
| Time Recorded | 09:35:00 AM |
| ansfer Tax Amount | \$847.00 |
| Document Number | 2022r-04168 |
| Book | 2022 |
| Page | 4168 |
| | |

| DO NOT RE-PROCESS. | Form RE | ETTD | Time Recorded | 09:35:00 AM |
|---|---|---------------------------|--------------------------------|---|
| | Do not use r | ed ink. | Transfer Tax Amount | \$847.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-04168 |
| | | | Book | 2022 |
| 2. Municipality BATH | | | Page | 4168 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| HILLICOSS, BENJAMIN | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID |
| | | | | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 1 NICHOLS STREET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLER | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| BOBBE, ERIK S | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 22 STARFLOWER LANE | | BRUNSWIC | K | ME 04011 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | | |
| 34 | 29 | No maps exist | number that best descr | ibes the prop- |
| | | Multiple parce | ls | |
| 5c. Physical location | | Portion of pare | | . Acreage (see instructions) |
| 1 NICHOLS STREET | | Not applicable | | 0.19 |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$192,50000 |
| Ch. Fair market value /Fr | ator a value and if you entered " | O" or a naminal value on | line (a) (b | · |
| ob. Fail Market value (Er | nter a value only if you entered "(| or a nominal value on | ille 6a) 6b. | ■00 |
| 6c. Exemption claim - Check the box if either | r grantor or grantee is claiming e | xemption from transfer to | ax and enter explanation below | l. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | | | |
| 06-16-2022 | open space, tree growth, or be triggered by developmer | | | lty may CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there | any special circumstances | with 10. IN | COME TAX WITHHELD. T | he buyer is not required to |
| the transfer that suggest the price paid was a market value? If yes, check the box and enter | either more or less than its fa | | old Maine income tax becau | |
| market value? If yes, check the box and ente | er explanation below. | | eller has qualified as a Mai | |
| | | | onsideration for the proper | from the State Tax Assessor ty is less than \$50,000 |
| | | | ne transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in | | | | |
| to the best of my knowledge and belief the in tion provided by Grantor(s) and Grantee(s) a | | | | |
| constitutes a legal signature. | | , | | |
| PREPARER. Name of preparer: <u>JEFFREY</u> | VIGUE | Phone numbe | r: (207) 518-9098 | |
| Mailing address: 75 JOHN ROBE | RTS ROAD, SUITE B11 | Email address | _jeff@preferredtitlean | dclosing.com |
| SOUTH PORTL | AND, ME 04106 | Fax number:_ | | |
| | | | | Rev. 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 06/17/2022 |
| Time Recorded | 12:53:00 PM |
| ansfer Tax Amount | \$1,606.00 |
| Document Number | 2022r-04196 |
| Book | 2022 |
| Page | 4196 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form Ki | טווב | Tille Recorded | 12.93.00111 |
|--|--|--|---|--|---|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,606.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04196 |
| 2. Municipality BAT | TLI | | | Book | 2022 |
| DA1 | . П | | | Page | 4196 |
| 3. GRANTEE/PURC | | | | BOOK/PAGE - F | REGISTRY USE ONLY |
| | ne, MI; or business name | | | | 3b. SSN or federal ID |
| WEST, DAVI | Dne, MI; or business name | | | | 3d. SSN or federal ID |
| | ,, | | | | |
| 3e. Mailing address afte | er purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 723 MIDDLE | STREET, UNIT | 3 | BATH | | ME 04530 |
| 4. GRANTOR/SELLE | R | | | | |
| | ne, MI; or business name | | | | 4b. SSN or federal ID |
| NUTTING, SO | JOHA | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 1309 HIGH ST | FREET | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot 90 | Check any that ap No maps exis | number that best desc | ribes the prop- |
| | 14 | 70 | Multiple parce | erty being sold (see in | structions). |
| 5c. Physical location | | | Portion of par | | d. Acreage (see instructions) |
| 1309 HIGH ST | IREET | | Not applicabl | e | 0.00 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$365,000 .00 |
| | 6b. Fair market value (E | nter a value only if you entered ' | 0" or a nominal value or | ı line 6a) 6b. | ■00 |
| 6c. Exemption claim - | · | er grantor or grantee is claiming e | | , | |
| 2012110111 | | g.ag | | | |
| 7 DATE OF TRANSI | | 8. CLASSIFIED. WARNING | TO BUYER - If the | property is classified as far | mland |
| 7. DATE OF TRANSF 06-14-2022 | | open space, tree growth, o be triggered by developme | r working waterfront, | a substantial financial pena | |
| 9 SPECIAL CIRCUM | | | | | |
| the transfer that sugg | ASTANCES Were then | | | | The buver is not required to |
| market value? If yee | gest the price paid was | e any special circumstances either more or less than its f | with 10. IN | | The buyer is not required to use: |
| market value? If yes, | | e any special circumstances either more or less than its f | with 10. IN air withh | NCOME TAX WITHHELD. Toold Maine income tax becaseller has qualified as a Ma | use: ine resident |
| market value? If yes, | gest the price paid was | e any special circumstances either more or less than its f | with 10. IN withh | NCOME TAX WITHHELD. Toold Maine income tax becaseller has qualified as a Ma | use: ine resident from the State Tax Assessor |
| market value? If yes, | gest the price paid was | e any special circumstances either more or less than its f | with 10. IN withh X S | ICOME TAX WITHHELD. Toold Maine income tax becaseller has qualified as a Maxwaiver has been received | use: ine resident from the State Tax Assessor ty is less than \$50,000 |
| 11. OATH. Aware of pto the best of my kno tion provided by Grar constitutes a legal signal signal. | pest the price paid was check the box and ent penalties as set forth in wledge and belief the intor(s) and Grantee(s) and Grantere | e any special circumstances either more or less than its fer explanation below. 36 M.R.S. § 4641-K, I declanformation contained herein and of which preparer has an | with 10. IN Withh X S A A A A A A A A A A A A A A A A A A | COME TAX WITHHELD. To old Maine income tax becauseller has qualified as a Max waiver has been received consideration for the proper the transfer is a foreclosure and this return with the Grant complete. Declaration of prestand that the submission | use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| 11. OATH. Aware of pto the best of my kno tion provided by Grar constitutes a legal signal signal. | pest the price paid was check the box and ent penalties as set forth in wledge and belief the intor(s) and Grantee(s) and Grantere | e any special circumstances either more or less than its fer explanation below. 36 M.R.S. § 4641-K, I declanformation contained herein | with 10. IN Withh X S A A A A A A A A A A A A A A A A A A | ICOME TAX WITHHELD. To old Maine income tax becauseller has qualified as a Max waiver has been received Consideration for the proper the transfer is a foreclosure at this return with the Grant property. | use: ine resident from the State Tax Assessor tty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- |
| 11. OATH. Aware of pto the best of my kno tion provided by Grar constitutes a legal signal signal. | penalties as set forth in wledge and belief the intor(s) and Grantee(s) agnature. f preparer: CHARLE | e any special circumstances either more or less than its fer explanation below. 36 M.R.S. § 4641-K, I declanformation contained herein and of which preparer has an | with 10. IN withh X S A A A A A A A A A A A A A A A A A A | COME TAX WITHHELD. To old Maine income tax becauseller has qualified as a Max waiver has been received consideration for the proper the transfer is a foreclosure and this return with the Grant complete. Declaration of prestand that the submission | use: ine resident from the State Tax Assessor ty is less than \$50,000 e sale tor(s) and Grantee(s) and parer is based on informa- of an electronic form return |

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| Registry | SAGADAHOC |
|--------------------|------------------|
| Date Recorded | 06/17/2022 |
| Time Recorded | 03:16:00 PM |
| ransfer Tax Amount | \$1,227.60 |
| Document Number | 2022r-04200 |
| Book | 2022 |
| Page | 4200 |
| | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 03:16:00 PM |
|--|---------------------------------------|--|--------------------------------|--|------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,227.60 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04200 |
| 2 Municipality DAT | 77. Y | | | Book | 2022 |
| 2. Municipality BAT | .H | | | Page | 4200 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN or federal ID |
| CAMARA, LE | EV | | | | |
| , | ne, MI; or business name | | | | 3d. SSN or federal ID |
| CAMARA, SA | | | | | |
| | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 53 CHESTNU | TSTREET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLE | | | | | 41 0001 5 1 115 |
| | ne, MI; or business name | | | | 4b. SSN or federal ID |
| POWDERHOR | RN PROPERTIE | S, LLC, | | | |
| 4c. Last name, first nam | e, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 182 KING CE | ASER ROAD | | DUXBURY | | MA 02332 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap | | |
| | 25 | 281 | No maps exist | erty being sold (see ins | |
| 5c. Physical location | | | Multiple parce Portion of parc | | . Acreage (see instructions) |
| 53 CHESTNU | T STREET | | Not applicable | | 0.06 |
| 6. TRANSFER TAX | | | _ | | |
| O. TRANSFER TAX | 6a. Purchase price (If the | transfer is a gift, enter "0") | | 6а. | \$279,000 .00 |
| | 6b. Fair market value (Er | nter a value only if you entered " | '0" or a nominal value on | line 6a) 6b. | . 00 |
| 6c. Exemption claim - | Check the box if either | grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | <i>I</i> . |
| · | | | · | · | |
| | | 8. CLASSIFIED. WARNING | C TO DUVED. If the | wan autoria alasaified as form | wland |
| 7. DATE OF TRANSF 06-17-2022 | | open space, tree growth, o | r working waterfront, a | a substantial financial pena | |
| | | be triggered by developme | | on, or change in use. | CLASSII ILD |
| SPECIAL CIRCUM the transfer that suggestions | ISTANCES. Were there | any special circumstances either more or less than its f | with 10. IN | COME TAX WITHHELD. T old Maine income tax becau | |
| | check the box and ente | | | eller has qualified as a Mai | |
| | | | А | waiver has been received | from the State Tax Assessor |
| | | | | onsideration for the proper | |
| 44 0 4 7 1 1 4 | 10. 16.0.1 | 20 M D O 0 4044 K I I I | | he transfer is a foreclosure | |
| | | 36 M.R.S. § 4641-K, I decla formation contained herein | | | |
| tion provided by Gran constitutes a legal sig | | nd of which preparer has ar | ny knowledge. I under | stand that the submission o | of an electronic form return |
| | f preparer: DOROTH | Y JOST | Phone numbe | r: (207) 846-3460 | |
| Mailing address: _ | 45 FOREST FAI | LLS DRIVE | Email address | _djost@sdtitlemaine.c | om |
| | YARMOUTH, N | 1E 04096 | Fax number: | | |
| - | · · · · · · · · · · · · · · · · · · · | | ax nambel | | Rev 11/18 |

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| Registry | SAGADAHOC |
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| Date Recorded | 06/17/2022 |
| Time Recorded | 03:18:00 PM |
| ransfer Tax Amount | \$1,584.00 |
| Document Number | 2022r-04203 |
| Book | 2022 |
| Page | 4203 |
| | ECISTRY LISE ONLY |

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| | | Do not use | red ink. | Transfer Tax Amount | \$1,584.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04203 |
| | | | | Book | 2022 |
| 2. Municipality BAT | H | | | Page | 4203 |
| 3. GRANTEE/PURCI | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN or federal ID |
| CUTOLO, MC | | | | | |
| · | ne, MI; or business name | | | | 3d. SSN or federal ID |
| DURAS, BRA | | | Of Managina like | | 2 - Chata 2 - 7 D Cada |
| 210 MIDDLE | er purchasing this property | | 3f. Municipality BATH | | 3g. State 3h. ZIP Code ME 04530 |
| | | | DAIN | | WIE 04330 |
| 4. GRANTOR/SELLE | =R ne, MI; or business name | | | | 4b. SSN or federal ID |
| FOX, EVAN | ne, wit, or business name | | | | is solver leaster is |
| · | All as Dualinas and | | | | 41.000 |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 805 HIGH STI | REET | | BATH | | ME 04530 |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot | Check any that ap | number that best descri | ibas the prop |
| | 38 | 83 | No maps exist Multiple parce | erty being sold (see ins | tructions). |
| 5c. Physical location | | | Portion of pare | cel 5d | . Acreage (see instructions) |
| 210 MIDDLE | STREET | | Not applicable | | 0.20 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$360,00000 |
| | 0. 5 | | (0) | | · |
| | 6b. Fair market value (E | nter a value only if you entered ' | 'U" or a nominal value on | line 6a) 6b. | ■00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming e | exemption from transfer to | ax and enter explanation below | I. |
| | | | | | |
| 7. DATE OF TRANSF | ER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | • | | |
| 06-17-2022 | 2 | open space, tree growth, o be triggered by developme | | | CLASSIFIED |
| 9. SPECIAL CIRCUM | MSTANCES. Were there | e any special circumstances | with 10. IN | COME TAX WITHHELD. T | |
| | gest the price paid was check the box and ent | either more or less than its f er explanation below. | | old Maine income tax becau | |
| | | | | eller has qualified as a Mai waiver has been received | from the State Tax Assessor |
| | | | | onsideration for the propert | |
| | | | | he transfer is a foreclosure | |
| to the best of my know | wledge and belief the intor(s) and Grantee(s) | 36 M.R.S. § 4641-K, I decla nformation contained herein and of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| | f preparer: JEFFREY | VIGUE | Phone numbe | r: (207) 518-9098 | |
| Mailing address: | 75 JOHN ROBE | ERTS ROAD, SUITE B1 | 1 Email address | jeff@preferredtitlean | dclosing.com |
| | SOUTH PORTI | LAND, ME 04106 | Fax number:_ | | |
| _ | | | | | Rev. 11/18 |

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| Registry | SAGADAHOC | | |
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| Date Recorded | 06/22/2022 | | |
| Time Recorded | 08:55:00 AM | | |
| ransfer Tax Amount | \$0.00 | | |
| Document Number | 2022r-04275 | | |
| Book | 2022 | | |
| Page | 4275 | | |
| BOOK/PAGE - R | EGISTRY USE ONLY | | |

| | E-PROCESS. | Form RE | ETTD | Time Recorded | 08:55:0 | 0 AM |
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| | | Do not use red ink. | | Transfer Tax Amount | \$0.00 | |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-0 | 4275 |
| | | | | Book | 2022 | |
| 2. Municipality BAT | TH | | | Page | 4275 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | REGISTRY US | SE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN | or federal ID |
| LAWSON, MO | | | | | | |
| | ne, MI; or business name | | | | 3d. SSN c | or federal ID |
| BELL, JOSEP | I I er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 81 HIGH STR | | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLE | | | | | | 0.1000 |
| 4a. Last name, first nar | ne, MI; or business name | | | | 4b. SSN o | r federal ID |
| LAWSON, MO | ONICA A | | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN o | r federal ID |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 81 HIGH STR | EET | | BATH | | ME | 04530 |
| | . Map Block | Lot Sub-lot | Check any that a | apply 5b. Type of property - 6 | | |
| | 42 | 20 | No maps ex | ist number that best describer erty being sold (see ins | | 201 |
| 5c. Physical location | | | Multiple pare | _ | I. Acreage (see | instructions) |
| 81 HIGH STR | EET | | Not applicat | | 0.41 | , |
| 6. TRANSFER TAX | | | | | | |
| o. HANGI EN IA | 6a. Purchase price (If the | ne transfer is a gift, enter "0") | | 6a. | \$0 | ■ 00 |
| | 6b. Fair market value (E | Enter a value only if you entered " | 0" or a nominal value o | on line 6a) 6b. | \$255,000 | 00. |
| 6c. Exemption claim - | ${ m X}$ Check the box if either | er grantor or grantee is claiming e | xemption from transfe | r tax and enter explanation below | V. | |
| MARRIED TO | EACHOTHER | | | | | |
| 7. DATE OF TRANSI | FER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | TO BUYER - If the | property is classified as far | mland, | |
| 05-27-2022 | , | open space, tree growth, or be triggered by developmen | • | , a substantial financial pena tion, or change in use. | ilty may | CLASSIFIED |
| 9. SPECIAL CIRCUN | MSTANCES. Were ther | e any special circumstances | with 10. I | INCOME TAX WITHHELD. T | he buyer is n | ot required to |
| 0.0 | gest the price paid was check the box and ent | either more or less than its fa | AII | hold Maine income tax beca | | |
| market value. If yee, | onesk the box and one | or explanation below. | | Seller has qualified as a Mai A waiver has been received | | e Tax Assessor |
| | | | | Consideration for the proper | | |
| | | | | The transfer is a foreclosure | sale | |
| to the best of my kno | wledge and belief the intor(s) and Grantee(s) | 36 M.R.S. § 4641-K, I declar nformation contained herein and of which preparer has an | is true, correct and | complete. Declaration of pre | parer is base | d on informa- |
| PREPARER. Name o | f preparer: JESSICA | CHRISTOFARO | Phone numb | oer: (617) 666-9977 Ext | | |
| Mailing address: | 4 ALFRED CIR | | Email addre | ss: jchristofaro@myqui | eksilva.com | |
| | WALTHAM, M | IA 01730 | Fax number: | | Day | |
| | | | | | | |

PROCESSED ONLINE.

| Registry | SAGADAHOC | | |
|--------------------|-------------|--|--|
| Date Recorded | 06/22/2022 | | |
| Time Recorded | 11:58:00 AM | | |
| ransfer Tax Amount | \$0.00 | | |
| Document Number | 2022r-04289 | | |
| Book | 2022 | | |
| Page | 4289 | | |
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| DO NOT R | E-PROCESS. | Form R | ETTD | Time Recorded | 11:58:00 |) AM |
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| | | Do not use | red ink. | Transfer Tax Amount | \$0.00 | |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-0 | 4289 |
| | | | | Book | 2022 | |
| 2. Municipality BA7 | i'H | | | Page | 4289 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - R | REGISTRY US | E ONLY |
| · · | ne, MI; or business name | | | | 3b. SSN c | r federal ID |
| GEIER, WAR | | | | | | |
| | ne, MI; or business name | | | | 3d. SSN o | r federal ID |
| GEIER, KATH | er purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| 23 CRAWFOR | | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLE | | | 21111 | | 1,12 | 0.000 |
| | ne, MI; or business name | | | | 4b. SSN or | federal ID |
| GEIER, CO-T | RUSTEE, WARI | REN L. | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or | federal ID |
| | RUSTEE, KATH | RYN L. | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 23 CRAWFOR | RD DRIVE | | BATH | | ME | 04530 |
| | . Map Block | Lot Sub-lot | Check any that a | pply 5b. Type of property - 6 | | 0.000 |
| O. FROI ERTI | 22 | 041 | No maps exis | number that best describerty being sold (see ins | ribes the prop- | 201 |
| 5c. Physical location | | | Portion of pa | _ | l. Acreage (see | instructions) |
| 23 CRAWFOR | RD DRIVE | | Not applicab | le | 0.24 | |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$0 | . 00 |
| | 6b. Fair market value (E | nter a value only if you entered | "0" or a nominal value or | n line 6a) 6b. | \$140,000 | .00 |
| 6c. Exemption claim - | ${f X}$ Check the box if eithe | r grantor or grantee is claiming | exemption from transfer | tax and enter explanation below | v. | |
| Title 36 § | ;4641-C (15) from | n trustees to the bene | eficial owners | | | |
| 7. DATE OF TRANSF 06-20-2022 | | | or working waterfront, | property is classified as far a substantial financial pena ion, or change in use. | ıltv mav | CLASSIFIED |
| | | e any special circumstances either more or less than its | | NCOME TAX WITHHELD. T | • | ot required to |
| | check the box and ente | | | Seller has qualified as a Mai | ine resident | |
| | | | | A waiver has been received | | |
| | | | | Consideration for the proper The transfer is a foreclosure | • | \$50,000 |
| to the best of my kno tion provided by Grar constitutes a legal sig | wledge and belief the ir ntor(s) and Grantee(s) a anature. | nformation contained herein and of which preparer has a | is true, correct and c ny knowledge. I unde | ed this return with the Grant omplete. Declaration of pre- rstand that the submission (| parer is based | l on informa- |
| | f preparer: STODDA | | | er: (207) 721-0622 | 1 | |
| Mailing address: | 49 PLEASANT BRUNSWICK, | STREET | Email addres | s: officemanager@mai | nestatelaw.c | om |
| | | ME 04011 | | | | |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|-------------------|
| Date Recorded | 06/24/2022 |
| Time Recorded | 10:00:00 AM |
| ansfer Tax Amount | \$1,452.00 |
| Document Number | 2022r-04346 |
| Book | 2022 |
| Page | 4346 |
| BOOK/DAGE - B | ECISTRY LISE ONLY |

| DO NOT RE-PROCESS. | Form RETTD | | Time Recorded | 10:00:00 AM | |
|--|--|---------------------------|--|------------------------------|--|
| | Do not use r | ed ink. | Transfer Tax Amount | \$1,452.00 | |
| 1. County SAGADAHOC | | | Document Number | 2022r-04346 | |
| 2. Municipality BATH | | | Book | 2022 | |
| Billi | | | Page | 4346 | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY | |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID | |
| 48 YORK LLC, | | | | 01.0011 (1.115 | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN or federal ID | |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code | |
| 13 SEA COVE ROAD | | CUMBERLA | ND | ME 04110 | |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID | |
| LAWLEY, ADAM W | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID | |
| | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 1604 CORTLAND STREET | | DERUYTER | | NY 13052 | |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e | | |
| 21 | 014 | No maps exist | number that best descr | ibes the prop- | |
| | | Multiple parce | ls | , | |
| 5c. Physical location | | Portion of pard | | . Acreage (see instructions) | |
| 48 YORK STREET | | Not applicable | | 0.11 | |
| 6. TRANSFER TAX 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$330,000 •00 | |
| 6b. Fair market value (E | nter a value only if you entered "(| O" or a nominal value on | line 6a) 6b. | " 00 | |
| | | | | | |
| 6c. Exemption claim - Check the box if eithe | r grantor or grantee is claiming e | xempuon nom transier ti | ax and enter explanation below | <i>.</i> . | |
| | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING open space, tree growth, or | | | ltv mav | |
| 06-22-2022 | be triggered by developmer | nt, subdivision, partitio | on, or change in use. | CLASSIFIED | |
| 9. SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was | | | COME TAX WITHHELD. T old Maine income tax becau | | |
| market value? If yes, check the box and enter | | _ | eller has qualified as a Mai | | |
| | | | • | from the State Tax Assessor | |
| | | | onsideration for the proper | | |
| 11 OATH Aware of paralling as act fouth in | 26 M D C C 4644 K I doolor | | ne transfer is a foreclosure | | |
| 11. OATH. Aware of penalties as set forth in to the best of my knowledge and belief the ir | nformation contained herein i | s true, correct and co | mplete. Declaration of prep | parer is based on informa- | |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | and of which preparer has an | y knowledge. I unders | stand that the submission o | of an electronic form return | |
| PREPARER. Name of preparer: DAWN B | ROOKS | Phone number | r: (207) 767-4824 Ext | | |
| Mailing address: SEVEN OCEAN | | | | | |
| | | Email address | dbrooks@atrlaw.pro | | |
| SOUTH PORTL | | Email address | dbrooks@atrlaw.pro | | |

PROCESSED ONLINE.

MAINE REAL ESTATE TRANSFER TAX DECLARATION

SAGADAHOC Registry Date Recorded 06/24/2022 10.34.00 AM

| DO NOT RE-PROCESS. | Form RE | | Time Recorded | 10:34:00 AM |
|--|-------------------------------------|--------------------------------|---|-------------------------------|
| | Do not use r | ea ink. | Transfer Tax Amount | \$1,650.00 |
| 1. County SAGADAHOC | | | Document Number | 2022r-04357 |
| 2. Municipality BATH | | | Book | 2022 |
| Biiii | | | Page | 4357 |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first name, MI; or business name | | | | 3b. SSN or federal ID |
| BRICK, KELSEY | | | | 01.0001 (1.115 |
| 3c. Last name, first name, MI; or business name MOSLEY, MICHAEL | | | | 3d. SSN or federal ID |
| 3e. Mailing address after purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 1517 HIGH STREET | | BATH | | ME 04530 |
| | | DAIII | | WIE 04330 |
| 4. GRANTOR/SELLER4a. Last name, first name, MI; or business name | | | | 4b. SSN or federal ID |
| LEE, DANA S | | | | is. Cort of loadiants |
| | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 29 DENNY ROAD | | BATH | | ME 04530 |
| 5. PROPERTY 5a. Map Block | Lot Sub-lot | Check any that ap | ply 5b. Type of property - e number that best descr | ibas the prop |
| 13 | 10 | No maps exis | erty being sold (see ins | |
| 5c. Physical location | | Multiple parce Portion of par | | l. Acreage (see instructions) |
| 1517 HIGH STREET | | Not applicable | | 2.00 |
| 6. TRANSFER TAX | | | | |
| 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$375,000 |
| 6b. Fair market value (Er | nter a value only if you entered "(|)" or a nominal value on | line 6a) 6b. | . 00 |
| 6c. Exemption claim - Check the box if either | r grantor or grantee is claiming e | xemption from transfer t | ax and enter explanation below | V. |
| | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) | 8. CLASSIFIED. WARNING | TO BUYER - If the r | property is classified as farn | mland. |
| 06-23-2022 | open space, tree growth, or | working waterfront, a | a substantial financial pena | |
| | be triggered by developmer | | | |
| SPECIAL CIRCUMSTANCES. Were there the transfer that suggest the price paid was | | | COME TAX WITHHELD. Told Maine income tax becau | |
| market value? If yes, check the box and enter | er explanation below. | S | eller has qualified as a Mai | ne resident |
| | | | | from the State Tax Assessor |
| | | | onsideration for the proper he transfer is a foreclosure | |
| 11. OATH. Aware of penalties as set forth in | 36 M R S | | | |
| to the best of my knowledge and belief the in | formation contained herein i | s true, correct and co | mplete. Declaration of prep | parer is based on informa- |
| tion provided by Grantor(s) and Grantee(s) a constitutes a legal signature. | | , | | or an electronic form return |
| PREPARER. Name of preparer: LINDA D | AIGLE | Phone numbe | r: (207) 376-0634 | |
| Mailing address:11 BOWDOIN N | MILL ISLAND | Email address | : _ldaigle@sdtitlemaine | e.com |
| TOPSHAM, ME | 04086 | Fax number: | | |
| | 0 1000 | rax number | | |

PROCESSED ONLINE

| Registry | SAGADAHOC | | |
|-------------------|-------------------|--|--|
| Date Recorded | 06/24/2022 | | |
| Time Recorded | 10:34:00 AM | | |
| ansfer Tax Amount | \$1,650.00 | | |
| Document Number | 2022r-04357 | | |
| Book | 2022 | | |
| Page | 4357 | | |
| BOOK/DACE D | ECISTRY LISE ONLY | | |

| DO NOT R | E-PROCESS. | Form R | ETTD | Time Recorded | 10:34:00 AM |
|--------------------------|--|--|-------------------------|--|---------------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$1,650.00 |
| 1. County SAGA | ADAHOC | | | Document Number | 2022r-04357 |
| | | | | Book | 2022 |
| 2. Municipality BA | ГН | | | Page | 4357 |
| 3. GRANTEE/PURC | CHASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nar | me, MI; or business name | | | | 3b. SSN or federal ID |
| BRICK, KELS | SEY | | | | |
| | me, MI; or business name | | | | 3d. SSN or federal ID |
| MOSLEY, MI | | | 2f Municipality | | 2a State 2b ZID Code |
| 1517 HIGH S | er purchasing this property TDET | | 3f. Municipality BATH | | 3g. State 3h. ZIP Code ME 04530 |
| | | | ВАТП | | WIE 04330 |
| 4. GRANTOR/SELLI | EK me, MI; or business name | | | | 4b. SSN or federal ID |
| LEE, DANA S | • | | | | |
| | | | | | Art. CON on factour UD |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 29 DENNY R | OAD | | BATH | | ME 04530 |
| 5. PROPERTY 5a | ı. Map Block | Lot Sub-lot | Check any that a | number that best descr | |
| | 13 | 10 | Multiple parc | erty being sold (see ins | structions). |
| 5c. Physical location | | | Portion of pa | rcel 5d | l. Acreage (see instructions) |
| 1517 HIGH S | TREET | | Not applicab | le | 2.00 |
| 6. TRANSFER TAX | 6a. Purchase price (If th | e transfer is a gift, enter "0") | | 6a. | \$375,000 .00 |
| | Ch. Fair-wardert value (F | ······································ | 10" | | |
| | | inter a value only if you entered ' | | | ■00 |
| 6c. Exemption claim - | Check the box if either | er grantor or grantee is claiming of | exemption from transfer | tax and enter explanation below | V. |
| | | | | | |
| 7. DATE OF TRANS | FER (MM-DD-YYYY) | | | property is classified as farr a substantial financial pena | |
| 06-23-2022 | 2 | be triggered by developme | | | CLASSIFIED |
| | | e any special circumstances | | NCOME TAX WITHHELD. T | · · · · · · · · · · · · · · · · · · · |
| | gest the price paid was , check the box and ent | either more or less than its fer explanation below. | | Seller has qualified as a Mai | |
| | | | | • | from the State Tax Assessor |
| | | | | Consideration for the proper | • |
| | | | | The transfer is a foreclosure | |
| to the best of my kno | owledge and belief the interior of the interio | 36 M.R.S. § 4641-K, I decla nformation contained herein and of which preparer has an | is true, correct and c | omplete. Declaration of prep | parer is based on informa- |
| PREPARER. Name of | of preparer: LINDA D | PAIGLE | Phone number | er: (207) 376-0634 | |
| Mailing address: | | | Email addres | s: ldaigle@sdtitlemaine | e.com |
| | | WIILL ISLAND | Liliali audies | s, <u>radific e satiriemame</u> | |
| | TOPSHAM, MI | | Fax number: | | |

PROCESSED

| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 06/24/2022 |
| Time Recorded | 01:33:00 PM |
| ansfer Tax Amount | \$1,782.00 |
| Document Number | 2022r-04360 |
| Book | 2022 |
| Page | 4360 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT RE-PROCESS. Form RETTD Time Recorded 01:33:00 P | PM |
|---|-------------|
| Do not use red ink. Transfer Tax Amount \$1,782.00 | |
| 1. County SAGADAHOC Document Number 2022r-0430 | 60 |
| Book 2022 | |
| 2. Municipality BATH Page 4360 | |
| 3. GRANTEE/PURCHASER BOOK/PAGE - REGISTRY USE C | ONLY |
| 3a. Last name, first name, MI; or business name 3b. SSN or fee | deral ID |
| KASPRAK, CHRISTOPHER J | |
| 3c. Last name, first name, MI; or business name 3d. SSN or fee CHIN, DANIEL J | deral ID |
| | . ZIP Code |
| |)4530 |
| 4. GRANTOR/SELLER | |
| 4a. Last name, first name, MI; or business name 4b. SSN or fed | deral ID |
| BEAUCHAMP, SCOTT T | |
| 4c. Last name, first name, MI; or Business name 4d. SSN or fed | deral ID |
| BEAUCHAMP, BARYSHNIKA S | |
| 4e. Mailing address 4f. Municipality 4g. State 4h. | . ZIP Code |
| 1141 WASHINGTON STREET BATH, ME ME 0 |)4530 |
| 5. PROPERTY 5a. Map Block Lot Sub-lot Check any that apply 5b. Type of property - enter the code | |
| | 202 |
| Multiple parcels 5c. Physical location Portion of parcel 5d. Acreage (see instr | ructions) |
| 1141 WASHINGTON STREET Not applicable 0.14 | , |
| 6. TRANSFER TAX | |
| 6a. Purchase price (If the transfer is a gift, enter "0") | ■00 |
| 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | ■ 00 |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | |
| | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as farmland, | |
| open space, tree growth, or working waterfront, a substantial financial penalty may | ASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. Were there any special circumstances with 10. INCOME TAX WITHHELD. The buyer is not re | equired to |
| the transfer that suggest the price paid was either more or less than its fair withhold Maine income tax because: | · |
| X Seller has qualified as a Maine resident A waiver has been received from the State Ta | ax Assessor |
| Consideration for the property is less than \$5 | |
| The transfer is a foreclosure sale | |
| 11. OATH. Aware of penalties as set forth in 36 M.R.S. § 4641-K, I declare that I have reviewed this return with the Grantor(s) and Grantet to the best of my knowledge and belief the information contained herein is true, correct and complete. Declaration of preparer is based on tion provided by Grantor(s) and Grantee(s) and of which preparer has any knowledge. I understand that the submission of an electronic for constitutes a legal signature. | n informa- |
| PREPARER. Name of preparer: JOHN T. VOORHEES, JR. Phone number: (207) 729-1667 | |
| Mailing address: 13 PLEASANT STREET Email address: ewhite@midcoasttitle.com | |
| BRUNSWICK, ME 04011 Fax number: | |

PROCESSED ONLINE.

DLN: _1002240198979

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC Date Recorded 06/24/2022

| DO NOT R | E-PROCESS. | Form R | ETTD | Time Recorded | 01:38:00 PM |
|--|----------------------------|---|---------------------------|---|------------------------------|
| | | Do not use | red ink. | Transfer Tax Amount | \$2,134.00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04363 |
| | | | | Book | 2022 |
| 2. Municipality BAT | `H | | | Page | 4363 |
| 3. GRANTEE/PURCH | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN or federal ID |
| NICHOLS, CA | ATHERINE | | | | |
| , | e, MI; or business name | | | | 3d. SSN or federal ID |
| BEST, KARL | | | | | |
| | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code |
| 1513 HIGH ST | REET | | BATH | | ME 04530 |
| 4. GRANTOR/SELLE | | | | | 45 CON on fordered ID |
| | ne, MI; or business name | ſ | | | 4b. SSN or federal ID |
| SILVESIKE, | CHARLENE M | L | | | |
| 4c. Last name, first nam | e, MI; or Business name | | | | 4d. SSN or federal ID |
| | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code |
| 15 ANDREW | STREET | | SALEM | | MA 01970 |
| 5. PROPERTY 5a. | Map Block | Lot Sub-lot | Check any that ap | | |
| | 13 | 11 | No maps exis | erty being sold (see ins | 7/11 |
| 5c. Physical location | | | Multiple parce | | . Acreage (see instructions) |
| 1513 HIGH ST | TREET | | Not applicable | | 0.00 |
| 6. TRANSFER TAX | | | | | |
| O. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$485,000 .00 |
| | 6b. Fair market value (E | inter a value only if you entered ' | '0" or a nominal value on | line 6a) 6b. | . 00 |
| 6c. Exemption claim - | Check the box if either | er grantor or grantee is claiming o | exemption from transfer t | ax and enter explanation below | ı. |
| | | | · | · | |
| | | O CLASSIFIED WADNING | C TO DUVED If the | property is classified as farn | aland |
| 7. DATE OF TRANSF 06-22-2022 | | open space, tree growth, o | r working waterfront, | a substantial financial pena | |
| | | be triggered by developme | | on, or change in use. | CLASSII ILD |
| SPECIAL CIRCUM the transfer that suggestions | ISTANCES. Were then | e any special circumstances either more or less than its f | with 10. IN | ICOME TAX WITHHELD. T old Maine income tax becau | |
| | check the box and en | | | eller has qualified as a Mai | |
| | | | А | waiver has been received | from the State Tax Assessor |
| | | | | consideration for the proper | |
| 44 0 4 7 1 1 4 | 10. 15.0.1 | 0014 D 0 0 4044 K 1 1 1 | | he transfer is a foreclosure | |
| | | 36 M.R.S. § 4641-K, I decla nformation contained herein | | | |
| tion provided by Gran constitutes a legal sig | ` ' | and of which preparer has ar | ny knowledge. I under | stand that the submission o | of an electronic form return |
| PREPARER. Name of | | IATHAWAY | Phone numbe | r: (207) 899-4900 | |
| Mailing address: _ | 585 ROOSEVE | LT TRAIL | Email address | :_HATHAWAY@cum | berlandtitle.com |
| | WINDHAM, M | E 04062 | Fax number: | | |
| _ | | | I ax number | | Rev. 11/18 |

PROCESSED ONLINE.

| Registry | SAGADAHOC |
|-------------------|------------------|
| Date Recorded | 06/27/2022 |
| Time Recorded | 10:21:00 AM |
| ansfer Tax Amount | \$1,386.00 |
| Document Number | 2022r-04383 |
| Book | 2022 |
| Page | 4383 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

| DO NOT R | E-PROCESS. | Form RI | ETTD | Time Recorded | 10:21:00 AM | |
|---|---|--|---|------------------------------|------------------------------|--|
| | | Do not use red ink. | | Transfer Tax Amount | \$1,386.00 | |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-04383 | |
| 2 Municipality DAT | 77 T | | | Book | 2022 | |
| 2. Municipality BAT | .H | | | Page | 4383 | |
| 3. GRANTEE/PURCI | HASER | | | BOOK/PAGE - R | EGISTRY USE ONLY | |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN or federal ID | |
| LAVALLE, N | ELLIE S | | | | | |
| | ne, MI; or business name | | | | 3d. SSN or federal ID | |
| HALLIDAY, I | | | | | | |
| | r purchasing this property | | 3f. Municipality | | 3g. State 3h. ZIP Code | |
| 902 HIGH STI | REET | | BATH | | ME 04530 | |
| 4. GRANTOR/SELLE | | | | | Al- CON an fadanal ID | |
| | ne, MI; or business name | | | | 4b. SSN or federal ID | |
| KING, PETER | (| | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN or federal ID | |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State 4h. ZIP Code | |
| 330 PENDLET | TON POINT ROA | AD | ISLESBORO | | ME 04848 | |
| 5. PROPERTY 5a. | . Map Block | Lot Sub-lot | Check any that ap | | | |
| | 26 | 20 | No maps exist | erty being sold (see ins | , , , , , , , , | |
| 5c. Physical location | | | Multiple parce Portion of pare | | . Acreage (see instructions) | |
| 902 HIGH STI | REET | | Not applicable | | 0.00 | |
| | | | | | 0.00 | |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$315,000 .00 | |
| | 6b. Fair market value (Enter a value only if you entered "0" or a nominal value on line 6a) 6b. | | | | | |
| 6c. Exemption claim - Check the box if either grantor or grantee is claiming exemption from transfer tax and enter explanation below. | | | | | | |
| | | granner er granner is eranning i | | | | |
| | | | 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - | | | |
| 7. DATE OF TRANSF | | 8. CLASSIFIED. WARNING open space, tree growth, o | • | | Itv mav | |
| 06-24-2022 | | be triggered by developme | nt, subdivision, partition | on, or change in use. | CLASSIFIED | |
| 9. SPECIAL CIRCUM | ASTANCES. Were there | any special circumstances either more or less than its f | with 10. IN | COME TAX WITHHELD. T | | |
| | check the box and ente | | | eller has qualified as a Mai | | |
| | | | | | from the State Tax Assessor | |
| | | | | onsideration for the proper | | |
| | | | | he transfer is a foreclosure | | |
| to the best of my know tion provided by Gran | wledge and belief the ir ntor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla formation contained herein nd of which preparer has ar | is true, correct and co | mplete. Declaration of prep | parer is based on informa- | |
| constitutes a legal sig | gnature. f preparer: <u>MELISSA</u> | CUMMINGS | Phone numbo | r: (207) 553-2190 | | |
| Mailing address: | 25 SPRING STR | | | missy@treworgy-bal | dacci.com | |
| walling address. | SCARBOROUG | | | s | | |
| - | SCANDONOUC | 11, 1111 070/4 | Fax number:_ | | Rev 11/18 | |

MAINE REVENUE SERVICES SUPPLEMENT TO THE REAL ESTATE TRANSFER TAX FORM

This form is to be used in conjunction with the Real Estate Transfer Tax Form and provides additional information when necessary.

Please attach this form to the original transfer tax form before submitting to the County Registry of Deeds.

Use additional forms as necessary.

If you have any questions, please contact the property Tax Division at 207-287-2013 or e-mail: prop.tax@maine.gov.

| Additional Grantees/Purchasers – Last Name First | | Social Security | or Fed. ID# |
|--|--------|-----------------|-------------|
| 1. LAVALLE, RAVEN | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| Additional Grantors/Sellers – Last Name First | | Social Security | or Fed. ID# |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. <u> </u> | | | |
| 6. | | | |
| 7. | | | |
| 8. | | | |
| | 1 | | |
| Additional Municipalities | Map—Bl | ock—Lot—Sub-Lo | ot |
| 1. | | | _ |
| 2. | | | _ |
| 3. | | | _ |
| 4. | | | _ |
| 5. | | | _ |
| 6. | | | _ |
| 7. | | | - |
| 8. | | | _ |

PROCESSED

DLN: 1002240199337

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC Date Recorded 06/27/2022

| DO NOT RE-PROCESS. Form RETTD Do not use red ink. | | ΓD | Time Recorded _ | | 12:38:00 PM | |
|---|--------------------------------------|---|---|-------------------|--------------------|--|
| | | ink. | Transfer Tax Amoun | \$792.00 | | |
| 1. County SAGADAHOC | | | Document Number | r 2022r-04 | 4411 | |
| | | | Bool | 2022 | | |
| 2. Municipality BATH | | | Page | 4411 | | |
| 3. GRANTEE/PURCHASER | | | BOOK/PAGE - | - REGISTRY US | SE ONLY | |
| 3a. Last name, first name, MI; or business name | | _ | | 3b. SSN o | or federal ID | |
| BOULAY, WILLIAM P | | | | | | |
| 3c. Last name, first name, MI; or business name | | | | 3d. SSN o | r federal ID | |
| BOULAY, BARBARA | Of M | Auniainality | | 2a Stata | 2h ZID Codo | |
| 3e. Mailing address after purchasing this property 91 BLUFF ROAD | | Municipality ATH | | 3g. State | 3h. ZIP Code 04530 | |
| 4. GRANTOR/SELLER | Б | A111 | | IVIL | 04330 | |
| 4a. Last name, first name, MI; or business name | | | | 4b. SSN or | r federal ID | |
| JOHNSON, MICHELLE M | | | | | | |
| 4c. Last name, first name, MI; or Business name | | | | 4d. SSN or | r federal ID | |
| io. Edot hame, mot hame, wil, or Edomese hame | | | | 40. 0014 01 | r rederar ib | |
| | 45.40 | A | | | # 71D 0 1 | |
| 4e. Mailing address 103 BEDFORD STREET | | funicipality ATH | | 4g. State | 4h. ZIP Code 04530 | |
| | Lot Sub-lot | Check any that appl | y 5b. Type of property | | 04330 | |
| 5. PROPERTY 5a. Map Block 28 5c. Physical location 91 BLUFF ROAD | 182 | No maps exist Multiple parcels Portion of parce Not applicable | number that best de- erty being sold (see | scribes the prop- | 201 instructions) | |
| 6. TRANSFER TAX | | | | | | |
| 6a. Purchase price (If the tra | ansfer is a gift, enter "0") | | 6a. | \$180,000 | .00 | |
| 6b. Fair market value (Enter | a value only if you entered "0" or a | a nominal value on lir | ne 6a) 6b. | | ■ 00 | |
| 6c. Exemption claim - Check the box if either gr | antor or grantee is claiming exemp | otion from transfer tax | and enter explanation be | low. | | |
| | | | | | | |
| 7. DATE OF TRANSFER (MM-DD-YYYY) 01-24-2022 8. CLASSIFIED. WARNING TO BUYER - If the property is classified as farmland, open space, tree growth, or working waterfront, a substantial financial penalty may be triggered by development, subdivision, partition, or change in use. | | | | | | |
| 9. SPECIAL CIRCUMSTANCES. Were there at the transfer that suggest the price paid was eith | ner more or less than its fair | | OME TAX WITHHELD d Maine income tax bed | • | ot required to | |
| market value? If yes, check the box and enter of | expianation below. | | ler has qualified as a M raiver has been receive | | Tay Assesser | |
| | | | nsideration for the prop | | | |
| | | The | transfer is a foreclosu | ire sale | | |
| 11. OATH. Aware of penalties as set forth in 36 to the best of my knowledge and belief the infortion provided by Grantor(s) and Grantee(s) and constitutes a legal signature. PREPARER. Name of preparer: ANGEL BR | mation contained herein is true | e, correct and com | plete. Declaration of p | reparer is based | d on informa- | |
| PREPARER. Name of preparer: Through DR | | ŭ | | n of an electroni | ic form return | |
| DO DOMON | | _ Phone number: | (207) 729-9740 | | ic form return | |
| Mailing address: P.O. BOX 924 BRUNSWICK, MI | OADWATER | _ Phone number: | | | ic form return | |

PROCESSED ONLINE. DO NOT RE-PROCESS.

MAINE REAL ESTATE TRANSFER TAX DECLARATION **Form RETTD**

Do not use red ink.

| Registry | SAGADAHOC |
|---------------------|------------------|
| Date Recorded | 06/28/2022 |
| Time Recorded | 09:19:00 AM |
| Transfer Tax Amount | \$308.00 |
| Document Number | 2022r-04421 |
| Book | 2022 |
| Page | 4421 |
| BOOK/PAGE - R | EGISTRY USE ONLY |

1. County SAGADAHOC

| 2 Municipality DATH | | | Bo | ook | |
|--|--|-----------------------------------|---|--|--------------|
| 2. Municipality BATH | Page 4421 | | | | |
| 3. GRANTEE/PURCHASER | BOOK/PAG | BOOK/PAGE - REGISTRY USE ONLY | | | |
| 3a. Last name, first name, MI; or busines | s name | | | 3b. SSN or | federal ID |
| U.S. BANK NATIONAL | ASSOCIATION NOT I | N ITS INDIVIDU | AL CAPACITY | Y BUT SOLEL | Y AS TRUST |
| 3c. Last name, first name, MI; or business | s name | | | 3d. SSN or | federal ID |
| | | | | | |
| 3e. Mailing address after purchasing this | property | 3f. Municipality | | | 3h. ZIP Code |
| 60 LIVINGSTON AVE | | ST PAUL | | MN | 55107 |
| 4. GRANTOR/SELLER | | | | | |
| 4a. Last name, first name, MI; or busines | s name | | | 4b. SSN or t | federal ID |
| WOLFE JR, RAY C | | | | | |
| 4c. Last name, first name, MI; or Business | s name | | | 4d. SSN or f | federal ID |
| | | | | | |
| 4e. Mailing address | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 23 STANLEY DR | | LISBON | | ME | 04250 |
| | | | | | 04230 |
| 5. PROPERTY 5a. Map 8 | Block Lot Sub-lot 275 | Check any that app No maps exist | number that best | erty - enter the code describes the prop- | 202 |
| 20 | 213 | Multiple parcels | erty being sold (s | ee instructions). | 202 |
| 5c. Physical location | | Portion of parce | el | 5d. Acreage (see in | structions) |
| 5 MAPLE ST BATH, ME | E 04530 | Not applicable | | 0.12 | |
| 6. TRANSFER TAX | rice (If the transfer is a gift, enter "0") | | 62 | φO | 00 |
| oa. i uiciiase pi | nice (ii the transfer is a girt, effect o) | | 0a. | \$0 | ■00 |
| 6b. Fair market | value (Enter a value only if you entered | d "0" or a nominal value on li | ine 6a) 6b. | \$139,507 | . 00 |
| 6c. Exemption claim - X Check the bo | ox if either grantor or grantee is claimin | g exemption from transfer ta | x and enter explanation | below. | |
| DEED IN LIEU OF FOR | ECLOSURE | | | | |
| | 0.01.40015150.144.5111 | NC TO BLIVED. If the pr | reports in algorities a | o formuland | |
| 7. DATE OF TRANSFER (MM-DD-Y | (YYY) 8. CLASSIFIED. WARNII open space, tree growth, | | | penalty may | N ACCIFIED |
| 03-01-2022 | be triggered by developm | nent, subdivision, partition | n, or change in use. | | CLASSIFIED |
| 9. SPECIAL CIRCUMSTANCES. We | | | COME TAX WITHHE | • | required to |
| the transfer that suggest the price parameter value? If yes, check the box | | o iaii | | | |
| | | | ller has qualified as a vaiver has been rece | | Tax Assessor |
| SEC. 4641-C(13) DEED 1 | IN LIEU OF FORECLOS | SURE Co | nsideration for the p | roperty is less than S | \$50,000 |
| ` ′ | | X Th | e transfer is a foreclo | osure sale | |
| 11. OATH. Aware of penalties as set | | | | | |
| to the best of my knowledge and beli tion provided by Grantor(s) and Gran | | | | | |
| constitutes a legal signature. | | | | | |
| PREPARER. Name of preparer: <u>CR</u> | I STAL IN SKINNER | Phone number: | (720) 566-8013 | | |
| Mailing address:11802 RI | DGE PKWY., STE. 100 | Email address: | crystalyn.skinne | r@svclnk.com | |
| WESTMI | INSTER, CO 80021 | Fax number: | | | |
| | | | | Rev. | 11/18 |
| | | | | | |

PROCESSED

DLN: 1002240199340

MAINE REAL ESTATE TRANSFER TAX DECLARATION

Registry SAGADAHOC Date Recorded 06/30/2022

| ONI | ONLINE. DO NOT RE-PROCESS. TRANSFER TAX DECLARATION Form RETTD | | Date Recorded | 00/30/20 | 022 | |
|---|--|---|---|---|-----------------|-------------------|
| | | | Time Recorded | 01:06:00 PM | | |
| | | Do not use red ink. | | Transfer Tax Amount | \$1,100.0 | 00 |
| 1. County SAGA | DAHOC | | | Document Number | 2022r-0 | 4512 |
| 2. Municipality BAT | 71.1 | | | Book | 2022 | |
| 2. Municipality BAT | . П | | | Page | 4512 | |
| 3. GRANTEE/PURC | HASER | | | BOOK/PAGE - F | REGISTRY US | SE ONLY |
| 3a. Last name, first nam | ne, MI; or business name | | | | 3b. SSN o | or federal ID |
| MCCOLE, MA | ARC R. | | | | | |
| 3c. Last name, first nam | ne, MI; or business name | | | | 3d. SSN o | r federal ID |
| 3e. Mailing address afte | r purchasing this property | | 3f. Municipality | | 3g. State | 3h. ZIP Code |
| P.O. BOX 186 | | | BATH | | ME | 04530 |
| 4. GRANTOR/SELLE | ER | | | | | |
| 4a. Last name, first nam | ne, MI; or business name | | | | 4b. SSN o | r federal ID |
| ESTATE OF I | DAVID G. JENEO | С, | | | | |
| 4c. Last name, first nam | ne, MI; or Business name | | | | 4d. SSN o | r federal ID |
| | | | | | | |
| 4e. Mailing address | | | 4f. Municipality | | 4g. State | 4h. ZIP Code |
| 62 BIRCHWO | OD ROAD | | WOOLWICH | I | ME | 04579 |
| 5. PROPERTY 5a.5c. Physical location22 NEWTON | Map Block 22 ROAD | Lot Sub-lot 58 | Check any that ap No maps exist Multiple parce Portion of pare Not applicable | number that best desc erty being sold (see in: ls | ribes the prop- | 202 instructions) |
| 6. TRANSFER TAX | 6a. Purchase price (If the | e transfer is a gift, enter "0") | | 6a. | \$250,000 |) .00 |
| | | | | | Ψ230,000 | |
| | 6b. Fair market value (Er | nter a value only if you entered ' | '0" or a nominal value on | line 6a) 6b. | | ■00 |
| 6c. Exemption claim - | Check the box if either | r grantor or grantee is claiming o | exemption from transfer to | ax and enter explanation below | W. | |
| | | | | | | |
| 7. DATE OF TRANSF 06-30-2022 | | 8. CLASSIFIED. WARNING open space, tree growth, obe triggered by developme | r working waterfront, a | a substantial financial pena | | CLASSIFIED |
| | | e any special circumstances either more or less than its f | | COME TAX WITHHELD. Told Maine income tax beca | | ot required to |
| market value? If yes, | check the box and ente | er explanation below. | X S | eller has qualified as a Ma | ine resident | |
| | | | | waiver has been received | | |
| | | | | onsideration for the proper he transfer is a foreclosure | • | 1 \$50,000 |
| to the best of my know tion provided by Gran constitutes a legal sid | wledge and belief the in ntor(s) and Grantee(s) a | 36 M.R.S. § 4641-K, I decla formation contained herein and of which preparer has an WOORHEES, JR. | is true, correct and co ny knowledge. I under | mplete. Declaration of pre | parer is based | d on informa- |
| Mailing address: | | | | ewhite@midcoasttit | le.com | |
| 0 | BRUNSWICK, I | | Fax number: | | | |
| | | | | | Rev | /. 11/18 • |