| Assessor Parcel Number: 011-200-54 Or R61E, 765, Sec 32, | |
|--|------------|
| Assessor's Manufactured Home ID number | '00 |
| Declaration of Homestead Declaration of Homestead Declaration of Homestead | OF |
| Check One | DLCCK |
| Married (filing joint declaration) | FICIAL |
| Head of Family | CCLN |
| By Husband (filing for joint benefit or both) CCUNTY, NEVADA | · ^ |
| Single Married or Widowed | الماميد |
| By Wife (filing joint benefit or both) | W. W |
| Multiple Single Persons | |
| Other | .ਜੇ |
| A. Citeck One Regular Home Dwelling/Manufactured Home Condominium Unit Other | |
| Name on Title of Property Mark Ken Stanson | No. |
| do individually or severally certify and declare as follows: | N |
| is/are now residing on the land, premises (or manufactured home) located in the City of HIKO | 7% |
| County of Lincoln, State of Nevada, and more particularly describe as follows: | . 3 |
| (Set forth legal description and commonly known street address OR manufactured home description) | \ / |
| (See form regar asserbeion and continion) known and an arrange of the second se | |
| | |
| | |
| BI/We claim the land and premises hereinabove described, together with the dwelling house thereon, and | |
| its appurtenances, or the described manufactured home as a Homestead. | |
| C. Check One (If applicable) | |
| (1) No former Declaration of Homestead has been made by me, or us, or either of us. | |
| (2) This Declaration constitutes an abandonment of the former Declaration recorded | |
| (1) This Decimation constitutes an abandoninant of the former Decimation (1) | |
| In Witness, Whereof, I'We have hercunto set my hand/our hands this 27 Haday of 20 04. | |
| rel 1/11 | |
| M. K. K. M. MANNA | |
| (Signature) (Signature) | |
| | |
| MALL LA DINES | |
| (Print or type name here) (Print or type name here) | |
| | |
| STATE OF NEVADA) | |
| COUNTY OF CLARK | |
| This instrument was acknowledged before me on | |
| (date) BRACK THOMPSON | |
| Notary Public. State of Nevaca | |
| CKKEN JOHNSON Appointment No. 99263241 | |
| (Person(s) appearing before notary) My Appt. Expires Dec. 3, 2007 | |
| | |
| My commission expires: $\sqrt{3-3-2cc}$ (seal, if any) | |
| (Signature of notarial officer) | |
| | |
| 5 11 5 11 11 11 11 11 11 11 11 11 11 11 | |
| Recording Requested by and Mail to: | |
| Name: Leslic Boucher | |
| Address/ City/ State/ Zip: POBOX 218 Proche Nevada 89043 | |
| The Recorder's Office assumes no liability for the completion of the Homestead Declaration. | |
| CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE | • |
| COHID/03 | |

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