

Official Record

Recording requested By
CHARLOTTE WALLIS

Lincoln County - NV
Leslie Boucher - Recorder

Fee: \$40.00

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RPTT:

Recorded By: AE

Book- 229 Page- 0417



0128518

APN _____

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Full Reconveyance

Title of Document

Affirmation Statement

_____ I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number of any person or persons. (Per NRS 239B.030)

I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number of a person or persons as required by law:

(State specific law)

Charlotte Wallis
Signature Title

Signature

March 15, 2007
Date

Grantees address and mail tax statement:

Charlotte Wallis
PO Box 54
Caliente NV 89008

