

Official Record

Recording requested By  
VERA LEAVITT

Lincoln County - NV  
Leslie Boucher - Recorder

Fee: \$14.00

Page 1 of 1

RPTT:

Recorded By: LB

Book- 247

Page- 0221

Assessor Parcel Number: 004-061-04 OR

Assessor's Manufactured Home ID number \_\_\_\_\_



0133446

Declaration of Homestead (Check One)

- Married (filing jointly)      \_\_\_\_\_ Married (filing individually)
- \_\_\_\_\_ Head of Family      \_\_\_\_\_ Widowed
- \_\_\_\_\_ Multiple Single Persons      \_\_\_\_\_ Single Person
- \_\_\_\_\_ By Wife (filing for joint benefit of both)
- \_\_\_\_\_ By Husband (filing for joint benefit of both)
- \_\_\_\_\_ Other: (Describe) \_\_\_\_\_

A. (Check One)

Regular Home Dwelling/Manufactured Home      \_\_\_\_\_ Condominium Unit      \_\_\_\_\_ Other

Name on Title of Property Michael and Vera Dell Leavitt

Do individually or severally certify and declare as follows: Michael and Vera Dell Leavitt  
is/are now residing on the land, premises (or manufactured home) located in the City of Alamo,  
County of LINCOLN, State of Nevada, and more particularly described as follows:

(set forth legal description and commonly known street address OR manufactured home description)

ROLL # 002337 R 61 E, T 7 S, SEC. 5, 5.516 A.  
DISTRICT - 4.0

B. \_\_\_\_\_ I/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)

\_\_\_\_\_ (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 July 9, 1991  
In Witness, Whereof, I/We have hereunto set my hand/our hands this 5 day of Feb, 2009,

Michael Leavitt (Signature)  
(Print or type name here)

Vera Dell Leavitt (Signature)  
(Print or type name here)

STATE OF NEVADA  
COUNTY OF LINCOLN



This instrument was acknowledged before me on 2/05/09  
MICHAEL LEAVITT AND VERA DELL LEAVITT (date)  
(Person(s) appearing before notary)

Kathleen R. Leonard My commission expires: aug 4, 2012  
(Signature of notarial officer)

CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE.

Recording Requested by and Mail to:

Name: Vera Dell Leavitt  
Address/City State/Zip: PO Box 342, Alamo, NV 89001