DOC # 0146724 01/21/2015 09:06 AM Official Record
Recording requested By LINCOLN COUNTY CLERK LINCOLN County - NV Leslie Boucher - Recorder
APN
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- Vath of Office - Hospital Trustee, Dist C 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)
Signature Title
1-13-15 Date
Grantees address and mail tax statement:



Bringing Quality Healthcare To The High Desert

Oath of Office

State of Nevada County of Lincoln

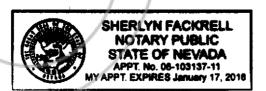
I, <u>Wanda Catherine Tennille</u>, do solemnly swear (or affirm) that I will support, protect and defend the Constitution and Government of the United States, and the Constitution and government of the State of Nevada, against all enemies, whether domestic or foreign, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution or law of any state notwithstanding, and that I will well and faithfully perform all the duties of the office of <u>Hospital Trustee</u>, <u>District C</u>, on which I am about to enter, so help me God; under the pains and penalties of perjury.

W. Catherine Sinnelle

State of Nevada County of Lincoln

Subscribed and sworn to before me this 6th day of Januar 4, 2015 by

Notary Public



tackrell