

WHEN RECORDED MAIL TO:
BARTON MEMORIAL NEVADA MEDICAL
P.O. BOX 9578
SO. LAKE TAHOE, CA 96158

Order No.
Escrow No. F59751CA

NOTICE OF COMPLETION

NOTICE IS HEREBY GIVEN THAT:

1. The undersigned is owner in the interest or estate stated below in the property hereinafter described.
2. The full name of the undersigned is BARTON MEMORIAL NEVADA MEDICAL CLINIC, INC.
3. The full address of the undersigned is P.O. BOX 9578
SO. LAKE TAHOE, CA 96158
4. The nature of the title of the undersigned is: In fee SIMPLE
5. The full names and full addresses of all persons, if any who hold title with the undersigned as joint tenants or as tenants in common are:
6. The names of the predecessors in interest of the undersigned, if the property was transferred subsequent to the commencement of the work of improvements herein referred to:
7. A work of improvements on the property hereinafter described was completed on November 13, 1996.
8. The name of the contractor, if any, for such improvements was HOSPITAL BUILDING & EQUIPMENT CO.
9. The property on which said work of improvements was completed is in the County of Douglas, State of Nevada, and described as follows:
Being a portion of Sections 3 and 10, Township 12 North, Range 20 East, M.D.B. & M. being further described as follows:

Parcel 4 as set forth on Parcel Map for JACOBSEN FAMILY TRUST, filed for record in the Office of the County recorder of Douglas County, State of Nevada, Recorded May 13, 1991, in Book 591, Page 1851, as Document No. 250593.

APN 25-160-38

10. The street address of said property is 1107 HIGHWAY 395 SOUTH
GARDNERVILLE, NV 89410

Dated November 19, 1996

BARTON MEMORIAL NEVADA MEDICAL CLINIC, INC.

STATE OF ~~NEVADA~~ CALIFORNIA)
County of EL DORADO)SS.

BY: Margaret Lera
MARGARET LERA, CHIEF FINANCIAL OFFICER

This instrument was acknowledged
before me on 11/20/96
by MARGARET LERA

SEE ATTACHED
Acknowledgement.

Lane M. Russell
Notary Public

FOR RECORDERS USE

401534

BK 1196 PG 3731

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

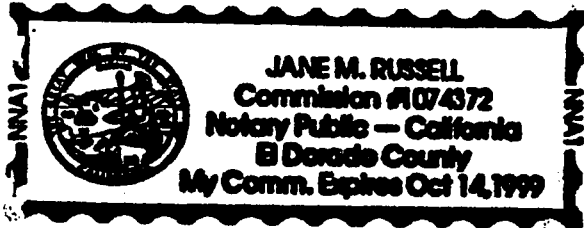
State of California

County of EL DORADO

On 11/20/96 before me, JANE M. RUSSELL
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared MARGARET LERA
Name(s) of Signer(s)

personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies); and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Jane M. Russell
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Notice of Completion

Document Date: 11/20/96 Number of Pages: (1)

Signer(s) Other Than Named Above: NONE

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- Individual
- Corporate Officer
Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

RIGHT THUMBPRINT OF SIGNER
Top of thumb here

Signer Is Representing: _____

Signer's Name: _____

- Individual
- Corporate Officer
Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

RIGHT THUMBPRINT OF SIGNER
Top of thumb here

Signer Is Representing: _____

COPY

REQUESTED BY
WESTERN TITLE COMPANY, INC.
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'96 NOV 22 P12 :05

401534
BK 1196 PG 3733

LINDA SLATER
RECORDER
\$ 9.00 PAID ks DEPUTY