

Declaration of Homestead

House • Condo • Mobile Home

A. Robin R. Hollowell

(Place Name(s) of the Declarant(s) as it appears on the property title)

(PLACE AN X IN THE APPLICABLE BOX BELOW)

(TYPE OR PRINT CLEARLY WITH BLACK PEN)

B. Do individually or severally certify and declare as follows:

1. Joint Declaration of Husband and Wife
2. By Single or Unmarried Person Head of Family
3. By Married Person as Sole and Separate Property
4. By Multiple Single Persons
5. Other: (Describe) _____
6. By Single Person NOT Head of a Family

C. Do severally and individually certify and declare that the following persons are residing on the land and premises (or mobile home) herein described in paragraph D: Robin R. Hollowell, a married woman as her sole and separate property

D. The street address of the property is _____ located in the City of Zephyr Cove, County of Douglas, State of Nevada, and more particularly described as follows: (Set forth legal description subdivision, lot, block, plat book, page number, etc.)

LOT 1-20, AS SHOWN ON THE MAP OF CASTLE ROCK PARK, UNIT NO. 1, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON APRIL 25, 1966, AS DOCUMENT NO. 31836

E. ASSESSORS PARCEL NO. (APN) 05-260-20

The above named person(s) claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described mobile home, as a Homestead.

The Undersigned person(s) do hereby certify and declare that there is no current Declaration of Homestead on file.

F. IN WITNESS WHEREOF, I and/or We have hereunto set my hand/our hands this 22nd day of April, 19 97

Robin R. Hollowell
Signature of Declarant

Robin R. Hollowell

(Print or type name here)

Signature of Declarant

(Print or type name here)

G. STATE OF NEVADA)
COUNTY OF Douglas)

This instrument was acknowledged before me on April 22, 1997 (date)

By Robin R. Hollowell

(Names of Person(s))

Karen Pawloski
NOTARY PUBLIC

(Notary Stamp)



H. RECORDING REQUESTED BY AND MAIL TO

NAME Ms. Robin R. Hollowell
ADDRESS ~~P.O. Box 6447~~ P.O. Box 5112 RA
CITY/ST/ZIP Stateline, NV 89449

If Applicable mail tax statement to:

NAME
ADDRESS
CITY/ST/ZIP

SPACE BELOW THIS LINE FOR RECORDERS USE ONLY

REQUESTED BY
Robin Hollowell
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

'97 APR 23 10:27

0411095

LINDA SLATER
RECORDER

BK0497PG3415 \$7.00 PAID K2 DEPUTY