CHECK ONE MARRIED (filing joint declaration) Single, Widow or Unmarried Person Multiple Single Persons Single Head of Family Multiple Single Persons Multiple Single Persons Single Head of Family Multiple Single Persons Multiple Single Person	Declaration of Homestead	
MARRIED (as sole and separate property) Multiple Single Persons By Husbard (filing for joint benefit of both) Single Head of Family Other: (Describe) Single Head of Family Other: (Describe) By Trustee of Trust (Personal Living Trust) (CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: CHECK ONE) HOUSE MOBILE HOME CHECK ONE) CHECK ONE CHEC	(CHECK ONE)	(TYPE OR PRINT CLEARLY WITH BLACK PEN)
By Husband (filing for joint benefit of both) Cher. (Describe) Other. (Describe) Describe) Describe Other. (Describe) Other. (Descri	☐ MARRIED (filing joint declaration) ☐ S	Single, Widow or Unmarried Person
By Wife (filing for joint benefit of both Other: (Describe)		
By Trustee of Trust (Personal Living Trust) (CHECK ONE) & HOUSE MOBILE HOME CONDOMINIUM UNIT TOWNHOUSE Name on title of property: Dougle E. SEDDON G. EARL A. SECODON Company of the land premises (or mobile home, condominium unit, bownhouse) as follows: PROPER		•
CHECK ONE) HOUSE MOBILE HOME CONDOMINIM UNIT TOWNHOUSE Name on title of property: JOLICE E. SEDON ON C. FARL A. SEDON COMPANIAL PROPERTY OF THE PLANS CONTROLLED NOT COMPANIAL PLANS CONTROLLED NOT		Other: (Describe)
Name on title of property:		☐ CONDOMINIUM UNIT ☐ TOWNHOUSE
Do Individually and severally certify and declare that the following named persons is/are residing on the land premises (or mobile nome, condominium unit, townhouse) as follows: located at (streat address) 16.70 MACKLAND AUF City of MINIOEN , County of DOUGLAS , State of Nevada, and more particularly described as follows: SUBDIVISION: LOT: 8 BLOCK: STONEGATE PLATBOOK: 787 PAGE NO.: 503 ASSESSORS PARCEL NO. 25-60-08 I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described mobile home, condominium unit, or townhouse as a Homestead. The Undersigned person(s) do hereby certify and declare that there is no current Declaration of Homestead on file. In vitness whereof, I/We have hereunto set my hand/our hands on DAR 17, 19.98 Signature of Declaration (Print or type name here) TATE OF NEVADA SS. COUNTY OF DOUGLASTORY This instrument was acknowledged before me on By STATE OF NEVADA SS. COUNTY OF DOUGLASTORY Not State of Reade RECORDING REQUESTED BY AND MAIL TO NAME: 1046 SEDOON ADDRESS: 16 90 Mackland New Services CITY, STATE, ZIP: MTNOGEN , Not Services 198 JUN -8 P1:38	Name on title of property: JOYCE E. SEDDON	V and EARL A. SEDDON Community
Icoted at (street address) Icoted at (street address) Iconty of Macklano Aue City of Minden County of Doublas , State of Nevada, and more particularly described as follows: SUBDIVISION: LOT: 8 BLOCK: STONEGATE PLATBOOK: 787 PAGE NO.: 503 ASSESSORS PARCEL NO. 25-600-08 I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described mobile home, condominium unit, or townhouse as a Homestead. If Witness Whereof, I/We have hereunto set my hand/our hands on DATA 17 19 9 \$ Signature of Declarant Signature of Declarant Signature of Declarant Signature of Declarant Signature of Notary Public) My commission expires: 1/26/38 FRANCES R. MACIAS (Roby Poble: Sale of Roday ADDRESS: 16 90 MOCKLONO AVE CITY, STATE, ZIP: MINDEN, NSD 89423 198 JUN -8 P1:38	Do individually and severally certify and declare that the following	named persons is/are residing on the land premises (or mobile
City of MINDEN County of Doubles , State of Nevada, and more particularly described as follows: SUBDIVISION: LOT: 8 BLOCK: STONEGATE PLATBOOK: 787 PAGE NO.: 503 ASSESSORS PARCEL NO. 25-600-08 I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described mobile home, condominium unit, or townhouse as a Homestead. The Undersigned person(s) do hereby certify and declared that there is no current Declaration of Homestead on file. In Witness Whereof, I/We have hereunto set my hand/our hands on DATE 17, 1995 Signature of Declarant Signature of Declarant CPrint or type name here) STATE OF NEVADA COUNTY OF DOUBLE STATE OF NEVADA (Signature of Notary Public) My commission expires: 11/26/38 RECORDING REQUESTED BY AND MAIL TO NAME: 1046 SEDOON ADDRESS: 690 NDCKLOOO RUE CITY, STATE, ZIP, DITINOEN, NEU S9433 198 JUN -8 P1:38	home, condominium unit, townhouse) as follows:	QUE I ROPER
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	NEWADALECAL CODES INC (702) 970 9077 & DEC 107	LINDA SLATER

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