8

Declaration of Homestead

(CHECK ONE)	(TYPE OR PRINT CLEARLY WITH BLACK PEN)
☐ MARRIED (filing joint declaration)	Single, Widow or Unmarried Person
☐ MARRIED (as sole and separate property) ☐	Multiple Single Persons
☐ By Husband (filing for joint benefit of both) ☐	Single Head of Family
☐ By Wife (filing for joint benefit of both ☐	Other: (Describe)
☐ By Trustee of Trust (Personal Living Trust)	~ \ \
(CHECK ONE) HOUSE MOBILE HOME	O 'T CONDOMINIUM UNIT TOWNHOUSE
Name on title of property: Frances M.	Pritchard
Do individually and severally certify and declare that the follow	ring named persons is/are residing on the land premises (or mobile
1000100 01 (01 001 0/0/01 000)	, State of Nevada, and more particularly described as follows;
	V T (L) - M
SUBDIVISION: Befarra Subdivision	uni # d T
	AT BOOK: PAGE NO.:
ASSESSORS PARCEL NO. 1320-30 816-	11365
ASSESSORS DADCEL NO 13 20 -30 816-	
ASSESSORS PARCEL NO. 17 000 7 2 10	
I/We claim the land and premises hereinabove described, together to	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 the	ro is no gympt Dodomtion of Homestand on file
The Officersighted person(s) do hereby certify and declare that the	is is the correct Declaration of Montestead on the.
In Witness Whereof, I/We have hereunto set my hand/our hands of	% ————————————————————————————————————
Dear and War	
1/m v V/w	\ \
Signature of Declarant	Signature of Declarant
Francies M. Pritchard	
(Print or type name here)	(Print or type name here)
OTHER DE MEMOR	
STATE OF NEVADA)	nalaa
COLINITY OF \$119 / 1 This instrument was	s acknowledged before me on $\frac{7-21-99}{}$
By Frances M. Pritchard	
By Market In the Market	
MIRMILMU IL DOUNCE	
(Signature of Notary Public)	MARY ANN WENNER Notary Public - State of Nevada
$M \cdot 1 \sim h$	Appointment Recorded in Douglas County
My commission expires: ////////////////////////////////////	otary Stamp) No: 96-2412-5 - Expires May 16, 2000
RECORDING REQUESTED BY AND MAIL TO	THIS SPACE FOR RECORDERS OFFICE ONLY
DTI.	•
NAME: Francos Prutchard	
ADDRESS: 1670 Belana Dr	
ADDRESS: 16/0 DEWOOD	
CITY, STATE, ZIP: Minden MV 89423	
CITY, STATE, ZIP: 11/malm (1) 89925	」 `

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