APN 1320-32-111-067

## **Declaration of Homestead**

	(TYPE OR PRINT CLEARLY WITH BLACK PEN)
(CHECK ONE)	
	Single, Widow or Unmarried Person
	Multiple Single Persons
	Single Head of Family
	Other: (Describe)
☐ By Trustee of Trust (Personal Living Trust)	
(CHECK ONE) A HOUSE D MOBILE HOME  Name on title of property: CORINNE ANDER	☐ CONDOMINIUM UNIT ☐ TOWNHOUSE
Name on title of property:	SON AND JAMES A MOIT
Do individually and severally certify and declare that the following	named persons is/are residing on the land premises (or mobile
home, condominium unit, townhouse) as follows: CORINA	E ANDERSON, JAMES A MOTT, MOLLYEN
located at (street address)	tate of Novada, and more particularly described as follows:
City of NINDEN, County of Doctachs, S	tate of Nevada, and more particularly described as follows.
SUBDIVISION: TOWNSITE OF MINDER	
TOUBLINGIEN. TO BOTH SITE OF THE SELECTION OF THE SELECTI	
LOT: / 4 2 BLOCK: O PLAT	FBOOK: B PAGE NO.: 2/5
MIS	
	n a n
ASSESSORS PARCEL NO. 1320 - 32 - 111 -	067
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 Witness Whereof, I/We have hereunto set my hand/our hands on .	APRIL 23, 2001
Course ander	
Signature of Declarant	Signature of Declarant
T.	
CORINNE ANDERSON	(Drint or type peme here)
(Print or type name here)	(Print or type name here)
STATE OF NEVADA )	
) ss.	cknowledged before me on april 23, 2001
This institution was acknowledged before the on	
By Corinne Anderson	
1. 1.	TERRY LUNDERGREEN
Ulrus Junaliante	Notary Public - State of Nevada
(Signature of Notary Public)	Appointment Recorded in County of Douglas  96.241.3.5 My Appointment Expires May 15, 2004
My commission expires: $5/15/2004$ (Nota	196-2413-5 My Appointment Expires may 15, 2004
RECORDING REQUESTED BY AND MAIL TO	THIS SPACE FOR RECORDERS OFFICE ONLY
NAME: COZINNE ANDERSON ADDRESS: BOX 671	REQUESTED BY
Rox 671	Count andus
ADDRESS: DOX 677	IN OFFICIAL REGORDS OF DOUGLAS CO. MEYADA
CITY, STATE, ZIP: MINDEN NV 89423	l · · · · · · · · · · · · · · · · · · ·
CITY, STATE, ZIP: MINDEN NV 89423	2001 APR 23 PM 4: 37
NEVADA LEGAL FORMS INC. (702) 870-8977. ● DEC 107	A E 1 2 Q L L. LINDA SLATER

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LINDA SLATER
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