ASSESSORS PARCEL NO.: APN 1022-16-001-109

DECLARATION OF HOMESTEAD

(CHECK ONE)	
☑ MARRIED (filing joint declaration) □ Single,	Widow or Unmarried Person
☐ MARRIED (as sole and separate property) ☐ Multiple	e Single Persons
☐ By Husband (filing for joint benefit of both) ☐ Single	Head of Family
☐ ByWife (filing for joint benefit of both ☐ Other:	(Describe)
☐ By Trustee of Trust (Personal Living Trust)	
(CHECK ONE)	\ \
☐ HOUSE ✓ MOBILE HOME 0 ☐ ÇO	NDOMINIUM UNIT
Name on title of property Momas A. 4 Syma 1	n. Forcedoxer dr.
. Do individually and severally certify and declare that the following named p	ersons is/are residing on the land premises (or mobile home
condominium unit, townhouse) as follows:	
located at (street address) 1505 ToPAI RANC	h DR.
City of Wellington, County of Dougha	State of Nevada, and more particularly
described as follows: SUBDIVISION: (set forth legal description and commonly	
decombed as follows. Cobbittolott. (see forth legal description and commonly	Miowii address)
LOT 1 IN BLOCK J, AS SET FORTH ON THE OFFICIAL MAP OF T	THE STREET OF THE PARTY OF THE STREET OF THE
# NO 4 PILED FOR RECORD IN THE OFFICE OF THE COUNTY REC	CORDER OF LOUGLAS COUNTY
NEVALA, ON NOVEMBER 26, 1970 IN BOOK 81, PAGE 214, AS	DOCUMENT NO. 50212
·····································	STATE OF THE STATE
I/We claim the land and premises hereinabove described, together wit	h the dwelling house thereon, and its appurtenances, or th
described mobile home as a Homestead.	V /
No former Declaration of Homestead has been made by me, us, o This Declaration of Homestead constitutes an abandonment of the	former Declaration recorded on
	Day or Dad
In Witness Whereof, I/We have hereunto set my hand/our hands on	Dec 21, 2001
(W/2 man 1 4 9)	1. my 16 16
Signature of Declarant Signature	gnature of Declarant
Signature of Deciarant	Triature of Declarant 7
THOMAS FALIKATER I	-rMA M. FAULTNER
"我们,我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	nt or type name here
STATE OF NEVADA)	
COUNTY OF DOUGLAS	
	(1)
	2007, personally appeared before me, a Notary Public
to me to be the person(s) whose name is subscribed to the above instrumen	t who acknowledged that the (1) executed the instrumen
to the to be the person(s) whose hame is subscribed to the above instrument	t will acknowledged that oxodated the metallion
Tobas 5 Mark	
Signature of Notary Public ((Notary Stamp)
My commission expires: 8/21/2002	
	THE SPACE FOR DECORDERS USE ONLY
RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO	THIS SPACE FOR RECORDERS USE ONLY
Name Thomas H. + Sama M. Spulkner Ir.	
Address: 1505 ToPAZ NANCH DR	
1/1 /// + // 00////	DEBRA S. YORK
City/State/Zip: We 11, Nglon, NV. 89444	Notary Public - State of Nevada Appointment Recorded in County of Douglas
U	94-0402-5 My Appointment Expires Aug. 21, 2002
DEC107	0530661

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LINDA SLATER RECORDER

\$ 15 PAID 12 DEPUTY