REQUESTED BY
GEORY D-EVACE
IN OFFICIAL RECORDS OF
DOUGLAS CO.. NEVADA

Assessor Parcel Number: 1320-31-511-039 OR 2003 DEC -5 AM 9: 38 WERNER CHRISTEN
RECORDER Assessor's Manufactured Home ID number Declaration of Homestead PAID KO DEPUTY (Check One) Married (filing joint declaration) Head of Family By Husband (filing for joint benefit or both) Single, Married or Widowed By Wife (filing for joint benefit or both) Multiple Single Persons A. (Check One) X Regular Home Dwelling/Manufactured Home Condominium Unit Name on Title of Property GEOGRE, Nerner Leona Do individually or severally certify and declare as follows: (corge + Leon 6. Der ner is fare now residing on the land, premises (or manufactured home) located in the City of manufactured home). County of Douglas, State of Nevada, and more particularly described as follows: (Set forth legal description and commonly known street address OR manufactured home description)
Let I, in Black 6, as shown on the map of Mackland Subdivis
the office of the County Recorder of Douglas County, on De I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, or the described manufactured home as a Homestead. (Check One) (1) No former Declaration of Homestead has been made by me, or us, or either of us. (2) This Declaration constitutes an abandonment of the former Declaration recorded tness, Whereof, I/We have bereunto set my hand/our hands this (Signature) (Print or type name here) (Print or type name here) MARY ANN WENNER STATE OF NEVADA COUNTY OF Jour 15 Notary Public - State of Nevada This instrument was acknowledged before me on _/ & 4 Appointment Recorded in County of Douglas My Appointment Expires May 3, 2004 (Person(s) appearing before notary) My commission expires: 5304 (seal, if any) (Signature of notarial officer)

This form provided as a courtesy to the taxpayer by: M. W. SCHOFIELD, CLARK COUNTY ASSESSOR The Assessor's Office assumes no liability for the completion of the Homestead Declaration.

1601 Lucerne St., Minden, NV 89423

CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE

Recording Requested by and Mail to: Name: Leona Derner

Address/ City/ State/ Zip: