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Assessor's Parcel Number:

1320-27-001-014

Recording Requested By:

ZEN + DIANA ALLDREDGE

Address:

PO BOX

City/State/Zip

MINNEW M 89423

Real Property Transfer Tax:

NOTICE OF COMPLETION

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies) This cover page must be typed or legibly hand printed.

C\bc docs\Cover page for recording

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2004 AUG 17 PM 4: 45

WERNER CHRISTEN RECORDER

\$ 15 PAID Kd

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO:
Name IndyMac Bank HCL Roll to Perm Department
Address 3465 E. Foothill Blvd

City & State

Pasadena, CA

Zip 91107

SPACE ABOVE THIS LINE FOR RECORDER'S USE

NOTICE OF COMPLETION

The undersigned is the owner of the interest or estate stated below in the property hereinafter described The full name of the undersigned is	1
The full name of the undersigned is	1
The nature of the title of the undersigned is	. \
(E.G. owner in fee OR vendee under contract of purchase OR lessee OR OTHER APPROPRIATE DESIGNATION) The full names and full addresses of all persons, if any, who hold title with the undersigned as joint tenants or as tenants in common are: NAMES	423
ADDRESSES PLANA ALLOGEDEE The names of the predecessors in interest of the undersigned, if the property was transferred subsequent to the commencement of the work of improvement herein referred to are (OR IF NO TRANSFER WAS MADE, INSERT THE WORK indication). NAMES A work of improvement on the property hereinafter described was completed on The name of the original contractor, if any, for the work of improvement was (NAME OF CONTRACTOR, OR IF NO CONTRACTOR FOR THE WORK OF IMPROVEMENT AS A WHOLE, INSERT THE WORK indication). [IF NOTICE COVERS COMPLETION OF CONTRACT FOR ONLY PART OF THE WORK OF IMPROVEMENT, ADD: The kind of work done or material furnished was (GIVE GENERAL STATEMENT, E.G., furnishing of concrete for sidewalks). The property on which the work of improvement was completed is in the City of	_ '
NAMES 22 N ALLOGEGE DIANA ALLOGEGE DIANA ALLOGEGE DIANA ALLOGEGE DIANA ALLOGEGE DIANA ALLOGEGE DIANA ALLOGEGE SHOLL SHILL SHI	n ""
The names of the predecessors in interest of the undersigned, if the property was transferred subsequent to the commencement of the work of improvement herein referred to are (OR IF NO TRANSFER WAS MADE, INSERT THE WORD (none"). NAMES A work of improvement on the property hereinafter described was completed on The name of the original contractor, if any, for the work of improvement was (NAME OF CONTRACTOR, OR IF NO CONTRACTOR FOR THE WORK OF IMPROVEMENT AS A WHOLE, INSERT THE WORD "none"). [IF NOTICE COVERS COMPLETION OF CONTRACT FOR ONLY PART OF THE WORK OF IMPROVEMENT, ADD: The kind of work done or material furnished was (GIVE GENERAL STATEMENT, E.G., furnishing of concrete for sidewalks). The property on which the work of improvement was completed is in the City of	
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The property on which the work of improvement was completed is in the City of	Ē F
County of DOVELAS State of NV and is described as follows	
, state of, and is described as follows	i.
(set forth description of job site sufficient for identification, using legal description, if possible).	
The street address of the said property is 1775 BUCKTHORN CT, MINDEN W	
(NUMBER AND STREET, OR, IF THERE IS NO OFFICIAL STREET ADDRESS, INSERT THE WORD "none")	
Dated: 8/17 . 2004 Zwx Allhark	
(SIGNATURE)	
NAME) ZEN J. ACLOREDGO (TYPED	
VERIFICATION	
I, the undersigned, say:	
am the person who signed the foregoing notice. I have read the above notice and know its contents, and the facts stated therein are true of my own knowledge. I declare under penalty of perjury that the foregoing is true and correct.	
Executed at, this day of	
(SIGNATURE)	
Revised May	

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