The undersigned hereby affirms that this document does not contain a Social Security Number.

Print Name Under Signature:

Assessor Parcel Number:

When Recorded Return To:

DOC # 0731924 10/24/2008 02:22 PM Deputy: PK OFFICIAL RECORD Requested By: CAROL TOYE LONG

Dou	glas	Cou	nty	_	NV	
Karen	Elli	son	- F	Rec	orde	1

Page: 1 Fee:

14.00

BK-1008 PG- 3901 RPTT: 0.00



DECL	ADATI	ON OF	HOME	STEAD

DECLA	RATION OF HOMESTEAD
Check One:	
	Married (filing joint declaration)
	Head of Family
	By Husband (filing for joint benefit or both)
×	Single, Married or Widowed
	By Wife (filing joint benefit or both)
	Multiple Single Persons
	Other:
A: Check One	and the same of th
×	Regular Home Dwelling/Manufactured Home
	Condominium Unit
	Other
	of Property: CAROL TOYE LONG
Do individually	or severally certify and declare as follows: CAROL TO YE LONG
Is/are now resid	ting on the land, premises (or manufactured home) located in the City of: GARDNERVILLE
	16-145 State of Nevada, and more particularly described as follows:
/C + C + T 1 T	Tandatus I and the second of t
1972 Hui	DSON HOUSE SOMERSET - SERNLE MHIO1865 1446 DIMENSIONS GOXIZ FT
CCATED-RIV	description and commonly known street address OK manufactured nome description) pson thouse somerset - Servet MH101865 1446 - DIMENSIONS 60 X12 for lerview mobile home park, 596 Highboury 395 #30 CARDNERVILLE, NV 89410
B: >	\ \ \
	I/We claim the land and premises hereinabove described, together with the dwelling house appurtenances, or the described manufactured home as a Homestead.
The second secon	
In Witness, Wher	cof, I/We have hereunto set my hand/our hands this 21 day of 2 tober 20 8
11.	14 /
and	Taye Long
A .	Signature
CAROL District	TOYE LONG- Print Name here
Limit Learne nede	Flint Panne dele
STATE OF NEV	astronomia di manta d
	E AND WILLIAM I
COUNTY OF	Notary Public - State of Nevada Appointment Recorded in Douglas County
This instrument w	Appointment Recorded in Douglas County No: 99-19317-5 - Expires February 11, 2011
CAROL	No: 99-19317-5 - Expires February 11, 2011
Person appearin	hafaya walney
/ Sand	My commission expires: 2 - //-//
(Signature of nota	rial officer)
	ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE. This form provided as a courtesy to the
	plas County Recorder's Office. The Recorder's Office assumes no liability for the completion of the Homestead Declaration

NOTE: Please leave 1" margins blank.