X

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

DOC # 0735418
01/07/2009 04:18 PM Deputy: SI
OFFICIAL RECORD
Requested By:
THOMAS BECKER

Douglas County - NV Karen Ellison - Recorder

Page: 1 Of 1 Fee: BK-0109 PG- 688 RPTT:

109 PG- 688 RPTT: 0.00 '

14.00

Print Name Under Signature:

\*When Recorded Return To:

TAOMAS BECKER

1220 QUAIL RIDGE RID

GARDNERVILLE NV 89460-7711

Assessor Parcel Number: 1219 - 04 - 002 - 019

## **DECLARATION OF HOMESTEAD**

DECLA	RATION OF HOMESTEAD
Check One:	
3 <u>x</u>	Married (filing joint declaration)
	Head of Family
X	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	
X	Regular Home Dwelling/Manufactured Home
	Condominium Unit
	Other
	THOMAS A RECUED AND ARLENE H. BECKER, as trustees of
Name on Title o	of Property: THOMAS A. BECKER AND ARLENE H. BECKER, as trustees of of Property: THE BECKER FAMILY TRUST dated August 10, 1989  or severally certify and declare as follows: Thomas A BECKER AND ARLENE H BECKER
-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	ing on the land, premises (or manufactured home) located in the City of:
County of: Do	, State of Nevada, and more particularly described as follows:
(Set forth legal o	description and commonly known street address OR manufactured home description)
16T 3,	, in BLOCK A, as set forth on the official map of QUAIL RIDGE Subdivision
	S COUNTY, STATE OF NEVADA NOV 19, 1987, in BOOK 1187, Page 2785, as doc. No. 166813
B:	We Life claim the land and premises hereinabove described, together with the dwelling house
thereon, and its	appurtenances, or the described manufactured home as a Homestead.
T. 1179	eof, I/We have hereunto set my hand/our hands this day of day of
210	
X from	rus a Becker Signature
Signature	Signature
THOMAS	S A. BECKER
Print Name here	Print Name here
	SHANNON DECORSE
STATE OF NEV	ADA NOTARY PUBLIC
COUNTY OF	STATE OF NEVADA
This instruction	APPT. No. 06-109021-5  Was acknowledged before me on 1 7 109  MY APPT, EXPIRES OCT. 2, 2010
<del></del>	
Person(s) appearin	105 De CN(e)
I A A II	with the Configuration expires: 10-2-200
(Signature of notar	rial officer) My commission expires: 10 C CU U

CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE. This form provided as a courtesy to the taxpayer by: Douglas County Recorder's Office. The Recorder's Office assumes no liability for the completion of the Homestead Declaration. NOTE: Please leave 1" margins blank.