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DECLARATION OF HOMESTEAD

Douglas County - NV
Karen Ellison - Recorder

Assessor Parcel Number: 1318-23-211-003

Page: 1 Of 1 Fee: 14.00
BK-1209 PG- 0759 RPTT: 0.00

OR
Assessor's Manufactured Home ID Number: _____



Recording Requested by and Mail to:
Name: Rudolf H. and Barbara A. Kaschner
Address: P.O. Box 1612
City/State/Zip: Zephyr Cove, Nevada 89448-1612

- Check One:
- Married (filing jointly) Married (filing individually)
 - Head of Family Widowed
 - Single Person Multiple Single Persons
 - By Wife (filing for joint benefit of both)
 - By Husband (filing for joint benefit of both)
 - Other (describe): _____

- Check One:
- Regular Home Dwelling/Manufactured Home
 - Condominium Unit
 - Other TOWNHOME

Name on Title of Property
Rudolf H. and Barbara A. Kaschner

do individually or severally certify and declare as follows:
Rudolf H. and Barbara A. Kaschner

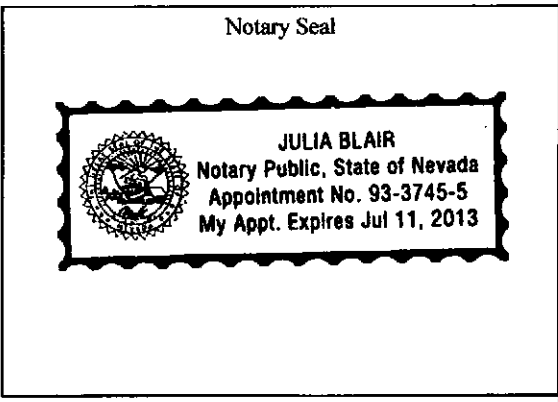
~~We~~ are now residing on the land, premises (or manufactured home) located in the city/town of Stateline
County of Douglas, State of Nevada, and more particularly described as follows:

(set forth legal description and commonly known street address OR manufactured home description)
LOT 59 OF LAKE VILLAGE, UNIT 2-E, AS SHOWN ON THE OFFICIAL MAP FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY NEVADA ON OCTOBER 19, 1972 IN BOOK 1 OF MAPS, AS DOCUMENT NO 62362, (131 HOLLY LANE, STATELINE, NEVADA).
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.

In Witness Whereof, I/we have hereunto set my hand/our hands this 3 day of December, 2009.

Rudolf H. Kaschner Barbara A. Kaschner
Signature Signature
RUDOLF H. KASCHNER BARBARA A. KASCHNER
Print or type name here Print or type name here

STATE OF NEVADA, COUNTY OF Douglas
This instrument was acknowledged before me on 12/3/09
by Rudolf H. Kaschner (date)
Person(s) appearing before notary
by Barbara A. Kaschner
Person(s) appearing before notary
Julia Blair
Signature of notarial officer



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

NOTE: Leave space within 1-inch margin blank on all sides.