DOC # 0756311 12/29/2009 11:34 AM Deputy: GB OFFICIAL RECORD

OFFICIAL RECORD
Requested By:
ALISON KAY WEST

14.00

DECLARATION OF HOMESTEAD	Douglas County - NV Karen Ellison - Recorder
Assessor Parcel Number: 1220-21-710-16	Page: 1 0f 1 Fee:
OR	BK-1209 PG- 6531 RPTT:
Assessor's Manufactured Home ID Number:	
Recording Requested by and Mail to:	
Name: ALISON WEST	\
Address: (Vi), 60x 263	
City/State/Zip: MINDEN, NV: 89433	
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)	dition
Other (describe): NAME CHANGE + SA	MITION
Check One:	V. 1 01
Regular Home Dwelling/Manufactured Home	Unit Other
Name on Title of Property AUSON KAY WEST AND DOUGLAS WEST	
do individually or severally certify and declare as follows:	
NIGON KNILIGET AND DOUGLAS 188 WEST	
is/are now residing on the land, premises (or manufactured home) loca	uted in the city/town of GAVDACIO IIIC
County of Douglas, State of Nevada, and more part	
(set forth legal description and commonly known street address OR ma	
PTN. SEC. 21 TIAN, RACE LOT	10 1 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
RANCHOS UNIT NO. 7. 654 CA	TMEL WAY, GARDNERVILLE,
	1460 "
the described manufactured home as a Homestead.	i the dwelling house thereon, and its appurtenances, or
In Witness, Whereof, I/we have hereunte set my hand/our hands this	24 - CRECEMBEY 2019
in witness, whereof, live have hereuned set my hand/our hands this	-1 day of 1/2 (21111/C1 , 2001.
alison gay west	
Alienal KON WEST	Signature
Print or type name here	Print or type name here
STATE OF NEVADA, COUNTY OF Docades	N
This instrument was acknowledged before me on 12-24 09	Notary Seal
by Alison Kay west on (date) Person(s) appearing before notary	
by	T HICKMAN NOTARY PUBLIC - STATE OF NEVADA
Person(s) appearing before notary	COUNTY OF DOUGLAS
	APPT. No. 09-10815-5 MY APPT. EXPIRES AUG. 6, 2013
Signature of notarial officer	
CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE.	
NOTE 1	
NOTE: Leave space within 1-inch margin blank on all sides.	Oct. 2009