

DECLARATION OF HOMESTEAD

Assessor Parcel Number: NEW 1219-15-001-077

OR

Assessor's Manufactured Home ID Number: _____

Recording Requested by and Mail to:

Name: LORRAINE T MACLEOD

Address: 984 Bollen Circle

City/State/Zip: GARDNERVILLE NV 89460

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

Name on Title of Property

LORRAINE T MACLEOD TRUSTEE of MACLEOD Family TRUST

do individually or severally certify and declare as follows:

LORRAINE T MACLEOD TR

is/are now residing on the land, premises (or manufactured home) located in the city/town of GARDNERVILLE, 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)

984 Bollen Circle
GARDNERVILLE NV 89460

LOT 4 AS SHOWN
ON THE OFFICIAL MAP
of SHERIDAN ACRES, UNIT
NO. 1

I/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 11 day of APRIL, 2011.

Lorraine T MacLeod
Signature

LORRAINE T. MACLEOD

Print or type name here

Signature

Print or type name here

STATE OF NEVADA, COUNTY OF DOUGLAS

This instrument was acknowledged before me on 4/11/11

by LORRAINE T. MACLEOD
Person(s) appearing before notary

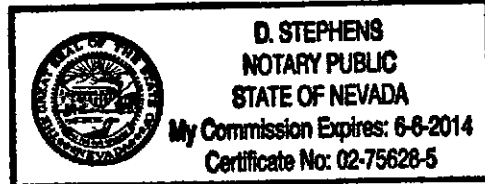
by _____
Person(s) appearing before notary

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.

Notary Seal



Oct. 2009