DOC # 0804685 06/26/2012 12:25 PM Deputy: SD

OFFICIAL RECORD Requested By:

JOHN & SUSAN TROCHE

14.00 0.00

Assessor Parcel Number: 170-28-310-022 OR Douglas County - NV
Assessor's Manufactured Home ID number Karen Ellison - Recorder Page: 1 of 1 Fee:
Declaration of Homestead (Check One) BK-0612 PG- 5842 RPIT:
Married (filing jointly) Head of Family Widowed Multiple Single Persons By Wife (filing for joint benefit of both) By Husband (filing for joint benefit of both) Other: (Describe) TRUST
A. (Check One)
X Regular Home Dwelling Adoms for the AVI
X Regular Home Dwelling/Manufactured Home Condominium Unit Other
Name on Title of Property John & Troche & Susan M Troche TRUSTEES of Troche Family
Do individually or severally certify and declare as follows: John R. Teorne & Corne to Corne
is/are now residing on the land, premises (or manufactured home) located in the City of MINDEN
State of Nevada and more particularly described as 6-11
(set forth legal description and commonly known street address OR manufactured home description) Lot 79 Block D, SARATOSA SPRINGS # 4, ACCORDING to the Plat of Records OF Douglas County, NEVADA
LOT 19 BLOCK D, SARATOGA SPRINGS # 4, ACCORDING
To the Plat of Records of Douglas County, NEVADA
BI/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.
C. (Check One)
(1) No former Declaration of Homestead has been made by me, or us, or either of us.
(2) This Declaration constitutes an abandonment of the former Declaration recorded
In Witness, Whereof, I/We have hereunto set my hand/our hands this 25 day of
John B Trocke Susan M Trocke
(Signatura)
(Duint or the Control of the Control
Black Public Cities of Neverla
STATE OF NEVADA) Appointment Recorded in Douglas County
COUNTY OF CLARK) Touglas No: 98-49567-5 - Expires November 6, 2014
This instrument was acknowledged before me on 625-12
John B. Troche, Susan M. (dage) roche
(Person(s) appearing before notary)
My commission envision 1/2 - 20 111
(Signature of notifical) My commission expires: 1-6-2014
CONSULT AN ATTORNEY VENOVI POVICE
CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE.
Recording Requested by and Mail to: MR. & MRS. JOHN B. TROCHE
Name: Address/City State/Zip: 2851 San Gabriel Dr. MINDEN NV 89423
Address/City State/Zip: 2851 San Gabriel Dr., MINDEN, NV 89423
This form provided as a courteeurs at
This form provided as a courtesy to the taxpayer by: M. W. Schofield, Clark County Assessor. The Assessor's Office assumes no liability for the completion of the Homestead Declaration.
and the Homestead Declaration