DOC # 0807407 08/13/2012 03:15 PM Deputy: SD OFFICIAL RECORD Requested By: IAN & KATHLEEN ALKIRE

14.00 0.00

DECLARATION OF HOMESTEAD	Douglas County - NV
Assessor Parcel Number: (220-24-601-005	Karen Ellison - Recorder
OR	Page: 1 Of 1 Fee:
Assessor's Manufactured Home ID Number:	BK-0812 PG-3076 RPTT:
Recording Requested by and Mail to:	
Name: AN + KATHLEN ALKIRE	
Address: 1909 SORREL LANK	\ \
Address: 1909 SORREL LANK City/State/Zip: BARDNERVILLE, NV 894/6	
Check One:	
Married (filing jointly)	
☐ 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:	
Kegular Home Dwelling/Manufactured Home	
Name on Title of Property	
IANDA KATHLEEN M. ALKIRE	
do individually or severally certify and declare as follows:	
IAN + KATHLELN ALKIRE	
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)	
1909 SORREL LANE, CARONERVILLE, N	EU1904 894/0
Title shains the band and an inches in the state of the s	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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 13 day of AUGUST , 2012.	
in witness, whereon, I we have necessition set my hand/our hands this 10 day of 17/00/051 , 2012.	
in ally Katheen M. Alline	
1An O Al W. CC	
Print or type name here ATHLEEN ALKIRE	
STATE OF NEVADA, COUNTY OF POLLAS,	
This instrument was seknowledged before use on 8/13/12	Notary Seal
(date)	
by // // / / / / / / / / / / / / / / / /	
by X Welt Territor (UKUL)	NOTARY PUBLIC STATE OF NEVADA
Person(s) applearing before plotary	County of Douglas
\ \\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SHANNON DECORSE
Signature of indicarial officer	Appt No. 06-109021-5 My Appt Expires October 2 2014
CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S	
FITNESS FOR YOUR PURPOSE.	1
NOTE: Leave space within 1-inch margin blank on all sides.	Oct. 2009