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00004985201408542630020023

KAREN ELLISON, RECORDER

DECLARATION OF HOMESTEAD

Assessor Parcel Number: 1219-23-001-033

OR

Assessor's Manufactured Home ID Number: _____

Recording Requested by and Mail to:

Name: SABRINA DENISE LOHR

Address: 77 INDIAN TRAIL ROAD

City/State/Zip: GARDNERVILLE, NY 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

SABRINA DENISE LOHR

do individually or severally certify and declare as follows:

SABRINA DENISE LOHR

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

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)

SEE ATTACHED

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 12 day of DECEMBER, 2014.

Sabrina Denise Lohr
Signature

Signature

SABRINA D. LOHR

Print or type name here

Print or type name here

STATE OF NEVADA, COUNTY OF DOUGLAS

This instrument was acknowledged before me on 12/12/14

(date)

by Sabrina Denise Lohr

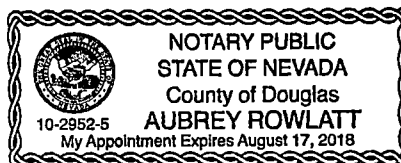
Person(s) appearing before notary

by * * *

Person(s) appearing before notary

Aubrey Rowlatt
Signature of notarial officer

Notary Seal



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

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

Oct. 2009

