DOUGLAS COUNTY, NV

Rec:\$14.00 Total:\$14.00

2015-858740 03/16/2015 04:43 PM

DALE RASMUSSON

DECLARATION OF HOMESTEAD

Assessor Parcel Number: 1420 - 33 - 810 - 043	0001009220150858740001001
OR	KAREN ELLISON, RECORDER
Assessor's Manufactured Home ID Number:	\ \
-	\ \
Recording Requested by and Mail to:	\ \
Name: Dale Rasmusson, Kathryn Rasmusson	- \ \ \
Address: 1343 Judy Street City/State/Zip: Minden W 89423	
C	
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:))
Regular Home Dwelling/Manufactured Home	her
Name on Title of Property	
Kathryn Rasmusson and Dale S. Rasmusson	<u>/ </u>
do individually or severally certify and declare as follows:	
Same	<
is/are now residing on the land, premises (or manufactured home) located in the city	y/town of <u>Minden</u>
County of Douglas, State of Nevada, and more particularly desc	ribed as follows:
(set forth legal description and commonly known street address OR manufactured l	home description)
1343 Judy Street Lot 26 Idle acres Subdiv	ision
File NO. 15812	
· · · ·	
I/We claim the land and premises hereinabove described, together with the dwelling	g 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 16 day of _	March , 20_13.
1 (8)	
Signature	Signature
Dale S. Rasmussow Print or type name here	
Print or type name here	Print or type name here
STATE OF NEVADA, COUNTY OF DOUGLAS	Notary Seal
This instrument was acknowledged before me on	, , , , , , , , , , , , , , , , , , , ,
by Dale Stewart Rasmusson	
Person(s) appearing before notary	
(SSS)	NOTARY PUBLIC
/) Person(s) appearing before notary	STATE OF NEVADA
Sharrine Farro	County of Douglas
Signature of notarial officer 12-695	6-5 SHAWNYNE GARREN ppointment Expires February 1, 2016
	SESSESSESSESSESSESSESSESSESSESSESSESSES
CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE.	

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

KAREN ELLISON, RECORDER

day of March Signature Print or type name here Notary Seal NOTARY PUBLIC STATE OF NEVADA County of Douglas SHAWNYNE GARREN My Appointment Expires February 1, 2016 Oct. 2009