



KAREN ELLISON, RECORDER

DECLARATION OF HOMESTEAD

Assessor Parcel Number: 1320-33-211-001

OR

Assessor's Manufactured Home ID Number: _____

Recording Requested by and Mail to:

Name: JONATHAN D. STORKE

Address: 1240 LASSO

City/State/Zip: GARDNERVILLE, NV 89410

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

JONATHAN D. STORKE

do individually or severally certify and declare as follows:

JONATHAN D. STORKE

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)

1240 LASSO Lot 130 Unit Development PD 04-008 The RAUCH AT GARDNERVILLE Phase IIB recorded at DOUGLAS COUNTY RECORDER, STATE OF NEVADA on Dec. 17, 2013 Book 12 Bat Page 2926 Doc # 83564 of Official Records
GARDNERVILLE, NV 89410

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 4th day of MARCH, 2016.

[Signature]

Signature

JONATHAN D. STORKE

Print or type name here

Signature

Print or type name here

STATE OF NEVADA, COUNTY OF DOUGLAS

This instrument was acknowledged before me on 3-4-16

(date)

by JONATHAN D STORKE

Person(s) appearing before notary

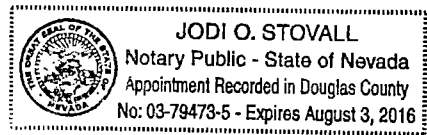
by _____

Person(s) appearing before notary

[Signature]
Signature of notarial officer

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

Notary Seal



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

Oct. 2009