

APN# _____

Recording Requested by/Mail to:

Name: Douglas County Recorder

Address: P.O. Box 218

City/State/Zip: Minden, NV 89423

Mail Tax Statements to:

Name: _____

Address: _____

City/State/Zip: _____



00043866201608885640020024

KAREN ELLISON, RECORDER

APPOINTMENT OF OATH

Title of Document (required)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

___ Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

___ Judgment – NRS 17.150(4)

___ Military Discharge – NRS 419.020(2)

Signature

Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting



Douglas County Recorder's Office

Karen Ellison, Recorder

<http://recorder.co.douglas.nv.us>

kellison@co.douglas.nv.us

(775) 782-9027

October 3, 2016

I hereby appoint BRENDA CRISTANELLI to the position of Deputy Recorder, effective this date until revoked by me.

Karen Ellison

Karen Ellison
Douglas County Recorder

State of Nevada }
County of Douglas }

I, BRENDA CRISTANELLI do solemnly swear that I will support, protect and defend the constitution and Government of the United States, and the Constitution and Government of the State of Nevada, against all enemies, whether domestic or foreign, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution, or law of any State of Convention or Legislature, to the contrary notwithstanding; and further that I do this with a full determination, pledge and purpose, without any mental reservation or evasion whatsoever. And further that I will well and faithfully perform all the duties of the office of Deputy Recorder on which I am about to enter. So help me God.

Brenda Cristanelli

Brenda Cristanelli

Subscribed and sworn to before me this

3rd Day of October, A.D. 2016

Shawnyne Garren
Notary

