

APN# N/A



KAREN ELLISON, RECORDER

Recording Requested by/Mail to:

Name: DOUGLAS County / DISTRICT Atty

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Mail Tax Statements to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_

DATA

Title of Document (required)

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

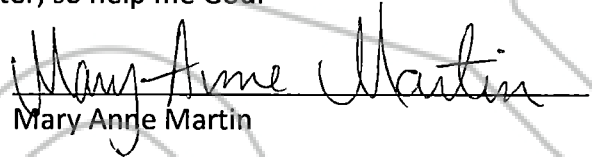
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\_\_\_\_\_

OATH OF OFFICE

I, Mary Anne Martin, do solemnly swear that I will support, protect and defend the Constitution and Government of the United States of America and the Constitution and Government of the State of Nevada against all enemies, whether foreign or domestic, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution or law of the State notwithstanding, and that I will well and faithfully perform all the duties of the office of Deputy District Attorney of which I am about to enter; so help me God.

  
Mary Anne Martin

SUBSCRIBED and SWORN to before me  
by Mary Anne Martin, this 3 day of  
July, 2017.

  
BY: \_\_\_\_\_  
COURT CLERK