DOUGLAS COUNTY, NV Rec:\$14.00

2017-904208 09/19/2017 11:09 AM

Pgs=1

DECLARATION OF HOMESTEAD	00061800201709942080010011
Assessor Parcel Number: 1420-34-811-026	KAREN ELLISON, RECORDER
OR	NAKEN ELLION, NEGOTIE
Assessor's Manufactured Home ID Number:	\ \ \
Recording Requested by and Mail to:	\ \
Name: Nathan and Angeli Orme	
Address: 1590 Johnson Lane	\
City/State/Zip: Minden, NV 89423	
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	
Nathan K. Orme and Angeli L. Orme	\//
do individually or severally certify and declare as follows:	
Nathan Orme and Angeli Orme	
is/are now residing on the land, premises (or manufactured home) located in the city/town of Minden	
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)	
The property address is 1590 Johnson Lane, its nearest cross street is E. Valley. The horse property includes an	
acre of land, single family home, water and sewage and any outbuilding on the land.	
Let B et El Rancho ESTATES DOC	
I/We claim the land and premises hereinabove described, together wi the described manufactured home as a Homestead.	th the dwelling house thereon, and its appurtenances, or
	10 - Soutonbor - 17
In Witness, Whereof, I/we have hereunto set my hand/our hands this	18 day of September , 20 17
Ameli (inne.	
Signature	Signature
	geli Orme Print or type name here
Print or type name here	17th of type name here
STATE OF NEVADA, COUNTY OF A SOUNTY	Notary Seal
This instrument was acknowledged before me on	
by NAN () rme Person(s) appearing before notary	
by Analli OrME	ERWIN ROJAS NOTARY PUBLIC
[Jerson(s) appearing before notary	STATE OF NEVADA
L'AND THE STATE OF	My Comm. Exp.; 07-14-2020 Certificate No: 16-3096-3
Signature of notarial officer	
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