DOUGLAS COUNTY, NV Rec \$35 00

2018-909940 02/01/2018 11 21 AM

Total \$35 00

Pgs=1

DEBORAH L S MOORE



DECLARATION OF HOMESTEAD	
Assessor Parcel Number 1 022-15-002-011 00068347201809099400010018	
OR KAREN ELLISON, RECORDER	
Assessor's Manufactured Home ID Number	
Recording Requested by and Mail to Name Szoyka Moore	
Address 3847 Sapphire Road	
City/State/Zip Wellington, NV 89444-	
Check One	
☐ Married (filing jointly) ☐ Married (filing individually)	
☐ Head of Family ☐ Widowed	3
■ Single Person □ Multiple Single Persons	h
☐ By Wife (filing for joint benefit of both)	
☐ By Husband (filing for joint benefit of both)	L
☐ Other (describe)	P
Check One	ļ
■ Regular Home Dwelling/Manufactured Home □ Condominium Unit □ Other	
Name on Title of Property Deborah L Szoyka Moore, married Nomm, sole and se parate property	
do individually or severally certify and declare as follows Deborah L Szoyka Moore, manife with man, sole and separate property	
is/are now residing on the land, premises (or manufactured home) located in the city/town of Wellington V V 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)	1
legally known as Lot 23, Block H, as shown on map of Topaz Ranch Estates Unit No 4, filed for record in the office of the County Recorder of Douglas County, State of Nevada, on November 16, 1970, in Book 1 of Maps, Page 224, as Document No 50212	
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 Watness, Whereof, The have hereunto set my hand/our hands thisday of January, 20_18	
Will Jame NA	
Deborah L Szoyka Moore n/a	
Print or type name here Print or type name here	
STATE OF NEVADA, COUNTY OF COUNTY OF Notary Seal	┧
This instrument was acknowledged before me on Janat, 2018  Notary Seal	
by Deborah L.S. Moore	
KATHRYN E THOMASELLI	
by NOTARY PUBLIC STATE OF NEVADA &	
No 03-85643 5 My Appt Exp April 1, 2018 8	
Signature of notarial officer	
CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM'S FITNESS FOR YOUR PURPOSE	
AAATIBUU A OA A O OA A O OA OOD	
NOTE Leave space within 1-inch margin blank on all sides  Oct 2009	1