

DECLARATION OF HOMESTEAD

Assessor's Parcel Number (APN): 1419-26-44-016 or
Assessor's Manufactured Home ID Number: 1019226-44-2016



Recording Requested by and Mail to:
Name: EDWARD R. ANHALT
Address: P.O. Box 1354
City/State/Zip: GENOA, NV 89411

Check One:
 Married (filing jointly) Married (filing individually)
 Widowed Single Person Multiple Single Persons Head of Family
 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:
EDWARD R. ANHALT CHERYL L. ANHALT
do individually or severally certify and declare as follows:
EDWARD R. ANHALT CHERYL L. ANHALT

is/are now residing on the land, premises (or manufactured home) located in the city/town of
GENOA, County of DOUGLAS COUNTY, State of Nevada, and
more particularly described as follows: (set forth legal description and commonly known street address
or manufactured home description)

LOT 50, IN BLOCK F, AS SHOWN ON THE FINAL SUBDIVISION MAP,
PLANNED UNIT DEVELOPMENT PUDS-001, MONTANA, PHASE 2ND 2D+2B
DOCUMENT NO 71494

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.

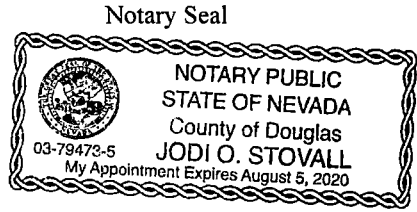
In witness, Whereof, I/we have hereunto set my hand/our hands this 28 day of October, 2019.

Ed Anhalt
Signature
ED ANHALT
Print or type name here

Cheryl Anhalt
Signature
CHERYL ANHALT
Print or type name here

STATE OF NEVADA, COUNTY OF DOUGLAS This instrument was acknowledged
before me on 10-28-19 (date)

By ED ANHALT Person(s) appearing before notary
By CHERYL ANHALT Person(s) appearing before notary
Jodi O. Stovall
Signature of notarial officer



CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM FITS YOUR PURPOSE.

NOTE: Do not write in 1-inch margin. Rev.Feb 2010