APN#	COURT
Recording Requested by/Mail to:	00173439202310011020020027
Name: Judicial Services - District Court Clerks Office	SHAWNYNE GARREN, RECORDER
Address: P.O Box 218	\ \
City/State/Zip: Minden, NV 89423	\\
Mail Tax Statements to:	
Name:	
Address:	
City/State/Zip:	
Oath-Amy Weidn	er
Title of Docume	nt (required) licable)
The undersigned hereby affirms that the	
DOES contain personal information as re	
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	
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DOUGLAS COUNTY/DISTRICT

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STATE OF NEVADA)
)ss.
COUNTY OF DOUGLAS)

I, Amy Weidner, 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 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 Apprentice Court Clerk on which I am about to enter. So help me God.

Amy Weidner

Subscribed and sworn to before me this

day of <u>OCHOOEK</u>, A.D. <u>202</u>3

Cherk of Court)

DEPUTY CLERK