

171877

Declaration of Homestead

(Place Name(s) of the Declarant(s) as it appears on the title of the property)

Wayne Patrick Robinson

(MARK ONE BELOW)

(TYPE OR PRINT CLEARLY WITH BLACK PEN)

Do individually or severally certify and declare as follows: (PLACE AN X AND FILL IN WHICH IS APPLICABLE)

- A
- (1.) Joint Declaration of Husband and Wife
 - (2.) By Married Person as Sole and Separate Property
 - (3.) Other: (Describe) _____
 - (4.) By Unmarried Head of Family
 - (5.) By Multiple Single Persons
 - (6.) By Single Person Not Head of a Family

(7.) The head of the family is Wayne Patrick Robinson
and _____
is now residing on the land and premises (or mobile home)

(8.) The property is located in the City of Eureka, County of Eureka, State of Nevada,
and more particularly described as follows: (Set forth legal description AND commonly known street address.)

Lot B of Parcel No. 3, as shown on that certain parcel map for Marion and Lena Van Vliet, filed in the Office of the County Recorder of Eureka County Nevada on April 6, 1989, as File No. 126926, located in a portion of Lot 11, Section 28, Township 20 North, Range 53 East, M.D.B & M.

(9.) ASSESSORS PARCEL NO. (APN) 007 - 380 - 53

B: I/We claim the land and premises hereinabove described, together with the dwelling house thereon, and its appurtenances, (or the described mobile home) as a Homestead.

C: I/We declare that there is no current Declaration of Homestead on file made by me, or us, or either of us.

IN WITNESS WHEREOF, I/We have hereunto set my hand/our hands this 2 day of February, 1999

Wayne Patrick Robinson
Signature of Declarant
Wayne Patrick Robinson
(Print or type name above)

Signature of Declarant

(Print or type name above)

STATE OF NEVADA }
COUNTY OF Eureka }
On this 2nd day of February, 1999
personally appeared before me, a Notary Public.
Wayne Patrick Robinson

RECORDING REQUESTED BY AND MAIL TO
NAME Wayne Patrick Robinson
ADDRESS PO Box 165
CITY/ST/ZIP Eureka NV 89216
If applicable mail tax statements to
NAME _____