Return To:

DECLARATION OF HOMESTEAD

KNOW ALL MEN BY THESE PRESENTS: That we, _____

of	viontana do he				
Declaration, reside on the premises. We claim said premises as a homestead as provided in Title 70, Chapter 32, M.C.A. The premises claimed as a homestead is the real property with all improvements and appurtenances the described as follows: City of, County of, State of Montana. N WITNESS WHEREOF, We have hereunto set our hands, State of Montana. N WITNESS WHEREOF, We have hereunto set our hands, 20 STATE OF MONTANA) COUNTY OF) Do this day of, 20, before me,, known to me to be the eresons whose names are subscribed to the within instrument and acknowledged to me that they executed the same. N WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year in this certificate f	fontana, do no	reby delcare:			
described as follows: Image: Control of Co	1.	Declaration, reside on the premises. We claim said premises as a homestead as provided in Title 70,			
N WITNESS WHEREOF, We have hereunto set our hands,20	2.	The premises claimed as a homestead is the real property with all improvements and appurtenances there described as follows:			
N WITNESS WHEREOF, We have hereunto set our hands,20					
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N WITNESS WHEREOF, We have hereunto set our hands,20					
STATE OF MONTANA) : COUNTY OF	City of		, County of	, State of Montana.	
STATE OF MONTANA) : COUNTY OF) On this day of, 20, before me, Notary Public for the State of Montana, personally appeared and, known to me to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same. N WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year in this certificate f	N WITNESS V	WHEREOF, We hav	e hereunto set our hands	,20	
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	nd persons whose r	names are subscribed	to the within instrument and ack	, known to me to be the nowledged to me that they executed the same.	

NOTARY PUBLIC for the State of Montana Residing at ______, Montana. My commission expires: _____

(SEAL)