

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO:

Name
Street
Address
City &
State
Zip

Title Order No. Escrow No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Full Reconveyance

Assessor Parcel Number:

or Substituted Trustee, under Deed of Trust dated _____, as Trustee, or Successor Trustee, executed by _____

Trustor, and recorded as Instrument No. _____ on _____, in Book _____, Page _____, of _____ Official Records in the office of the Recorder of _____ County, California, describing land therein as:

having received from holder of the obligations thereunder a written request to convey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust and the note or notes secured thereby having been surrendered to said Trustee for cancellation, does hereby RECONVEY, without warranty, to the person or persons legally entitled thereto, the estate now held by it thereunder.

Dated _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA
COUNTY OF _____

On _____ before me,

(here insert name and title of the officer)

_____, notary public, personally appeared _____

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Signature _____

_____ as such Trustee

By _____ Authorized Signature

(This area for official notarial seal)