## **REQUEST FOR FULL RECONVEYANCE**

To: \_\_\_\_\_, Trustee

and of	all other	e legal owner a indebtedness	s secured	by Deed	of Trust	dated _		, executed , as Trustor	by to
Records in	the Office of	_,as I f the Recorder	nstrument No	D.	in Boo	ok	as Trustees, a , Page	and recordedof Off	ficial
satisfied; an of said Dee by said Dee	nd you are d of Trust, ed of Trust	ogether with a hereby request to cancel said delivered to y designated by	ed and direct Note or Notes ou herewith,	ted, upon pay s above ment together with	/ment to you tioned, and a the said De	of any sum all other evid eed of Trust	s owing to you lences of inde t, and to recou	u under the te btedness secu nvey, with with	erms ured hout
Mail Recon	veyance to:								
STATE OF C	-			}SS.					
On		k	oefore me,				(insert	name) Notary	Public,

personally known to me(or 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.

WITNESS my hand and official seal.

personally appeared

Signature \_\_\_\_\_

(This area for official notarial seal)