RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

NAME
ADDRESS
CITY
STATE & ZIP

TITLE ORDER NO. ESCROW NO.	APN NO.
FULL RECONVEYANCE	
dated	, made by
Trustor; and recorded as Instrument No	on,
Trustor; and recorded as Instrument No, Page	, of Official Records in the office of the County ifornia, describing land therein as
having received from holder of the obligations thereunder a visaid Deed of Trust have been fully paid, and said Deed of surrendered to said Trustee for cancellation, does hereby RE entitled thereto, the estate now held by it thereunder. IN WITNESS WHEREOF.	f Trust and the note or notes secured thereby having been ECONVEY without warranty, to the person or persons legally
IN WITNESS WHEREOF, corporate name and seal to be hereto affixed by its duly author	prized officer.
Dated	
	as Trustee
	By
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 Onbefore me,	(here
insert name and title of the officer), personally appeared satisfactory evidence to be the person(s) whose name(s) is/a me that he/she/they executed the same in his/her/their author the instrument the person(s), or the entity upon behalf of which certify under PENALTY OF PERJURY under the laws of true and correct. WITNESS my hand and official seal.	, who proved to me on the basis of are subscribed to the within instrument and acknowledged to orized capacity(ies), and that by his/her/their signature(s) on h the person(s) acted, executed the instrument.
Signature	(Seal)