## **RECORDING REQUESTED BY** AND WHEN RECORDED MAIL TO: Name Street Address City & State Zip

Escrow No.

Title Order No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Full Reconveyance	
	Assessor Parcel Number:
	, as Trustee, or Successor Trustee,
or Substituted Trustee, under Deed of Trust dated	, executed by
Trustor, and recorded as Instrument No. on Official Records in the office of the Recorder of	, in Book , Page , 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.	
A notary public or other officer completing this certification verifies only the identity of the individual who signed document to which this certificate is attached, and the truthfulness, accuracy, or validity of that document	I the not
STATE OF CALIFORNIA COUNTY OF	
Onbefor	e me, as such Trustee
(here insert name and title of the officer) ,notary public, personally appeared	ByAuthorized Signature
who proved to me on the basis of satisfactory evidence to person(s) whose name(s) is/are subscribed to the within inst and acknowledged to me that he/she/they executed the si his/her/their authorized capacity(ies), and that by his/h signature(s) on the instrument the person(s), or the entity upon of which the person(s) acted, executed the instrument.	rument ame in er/their
I certify under PENALTY OF PERJURY under the laws of the s California that the foregoing paragraph is true and correct.	state of
WITNESS my hand and official seal Signature	
Orginatal C	(This area for official notarial seal)