

Full Reconveyance

BENEFICIAL MANAGEMENT CORPORATION OF AMERICA,
duly appointed Trustee under the following described Deed of Trust:

TRUSTOR(S): KENNETH H KOHLER AND LOIS J KOHLER, HUSBAND AND WIFE AS JOINT TENANTS

Recorded on AUG 21, 19 92 as Instrument No. 286530 in Book No. 892 at
Page 3549-3554 of Official Records in the office of the Recorder of DOUGLAS County, the
Deed of Trust covering the property described as follows:

SEE DESCRIPTION AS RECORDED

having been requested in writing, by the holder of the obligation secured by the above described Deed of Trust, to reconvey the estate granted to Trustee under the Deed of Trust, DOES HEREBY RECONVEY to the person or persons legally entitled thereto, without warranty, all the estate, title, and interest acquired by Trustee under the Deed of Trust.

Dated DEC 7, 19 94

BENEFICIAL MANAGEMENT CORPORATION OF AMERICA

By: *[Signature]*

S.D. Pummil
X Assistant Treasurer
 Agent and Attorney-in-Fact

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

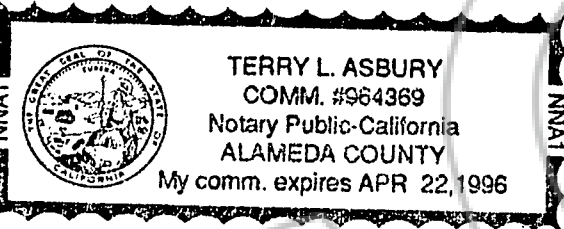
No. 5193

State of California }
County of Alameda }

On 1/13/95 before me, Terry L. Asbury, Notary Public
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared S. D. Pummil
NAME(S) OF SIGNER(S)

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.

Terry L. Asbury
SIGNATURE OF NOTARY

OPTIONAL SECTION

CAPACITY CLAIMED BY SIGNER

Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

- INDIVIDUAL
- CORPORATE OFFICER(S)
Assistant Treasurer
TITLE(S)
- PARTNER(S) LIMITED
 GENERAL
- ATTORNEY-IN-FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER: _____

SIGNER IS REPRESENTING:

NAME OF PERSON(S) OR ENTITY(IES)
Beneficial Management Corporation of America

OPTIONAL SECTION

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT: TITLE OR TYPE OF DOCUMENT 12/7/94
 NUMBER OF PAGES 1 DATE OF DOCUMENT 12/7/94
 Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form. SIGNER(S) OTHER THAN NAMED ABOVE NONE

WHEN RECORDED, PLEASE MAIL THIS INSTRUMENT TO

✓ Beneficial Mortgage Co.
1055 SO WELLS STE 115
RENO NV 89502
WESTERN TITLE CO.
1626 HIGHWAY 395
MINDEN NV 89423
Order No.
Escrow No. F59487CA

REQUESTED BY
Beneficial
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

95 JAN 17 AM 11:23

LINDA SLATER
RECORDER

PAID *Ka* DEPUTY

354426
BK0195PG2108