DOC # 0726830 07/15/2008 02:50 PM Deputy: DW OFFICIAL RECORD Requested By: MARQUIS TITLE

> Douglas County - NV Werner Christen - Recorder

Page: 1

0f 2

Fee:

BK-0708 PG-

PG- 2997 RPTT:

15.00



RECORDING REQUESTED BY

OLD REPUBLIC TITLE COMPANY

ESCROW #: 2132004567-NM APN #: 1318-15-612-003 WHEN RECORDED MAIL TO

Davis Wright Tremaine LLP 865 S. Figueroa Street, Ste. 2400

Los Angeles, CA 90017 Attn: Marc Jacobowitz

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## **REQUEST FOR COPY OF NOTICE OF DEFAULT**

IN ACCORDANCE WITH SECTION 29248, CIVIL CODE OF THE STATE OF CALIFORNIA, REQUEST IS HEREBY MADE THAT A COPY OF ANY NOTICE OF DEFAULT AND A COPY OF ANY NOTICE OF SALE UNDER THE DEED OF TRUST

RECORDED ON

SERIES NUMBER
COUNTY OF

EXECUTED BY

IN WHICH

7/15/08

of Official Records

IN BOOK/REEL AT PAGE/IMAGE 0708

<del>28-</del> 726829

: Douglas
: Kyle Swanson, M.D. and Britta Swanson

\_\_\_\_\_as Trustor (s)
\_\_\_\_is named Trustee

State of California

Stewart Title of Douglas County
 Barton Healthcare System, a California nonprofit public benefit

\_\_\_\_is harried frustee

AND

corporation

\_\_\_\_ is named Beneficiary

BE MAILED TO WHOSE ADDRESS IS

Davis Wright Tremaine LLP

865 S. Figueroa Street, Ste. 2400, Los Angeles, CA 90017

NOTICE: A COPY OF ANY NOTICE OF DEFAULT AND OF ANY NOTICE OF SALE WILL BE SENT ONLY TO THE ADDRESS CONTAINED IN THIS RECORDED REQUEST. IF YOUR ADDRESS CHANGES, A NEW REQUEST MUST BE RECORDED.

Nicole Martinelli -

Nicole Martinelli-Stein

FTGIS-220 2/94

Page 1 of 2

State of California )
County of El Dorado ) s.s.

on July 14, 2008

before me, a Notary Public in and for said County and State, personally

Nicole, martinelli- Stein

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 he /her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand a hollofficial seal

Signatur

