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Doc Number: **0809557**

09/21/2012 03:25 PM

**OFFICIAL RECORDS**

Requested By:

**Nationwide**

DOUGLAS COUNTY RECORDERS  
Karen Ellison - Recorder

Page: 1 Of 1 Fee: \$ 14.00

Bk: 0912 Pg: 5201



Deputy: pk

I hereby affirm that this document submitted for recording does not contain a social security number.

Signed: \_\_\_\_\_  
**ASHLEY BRABAND**  
**TITLE OFFICER**

When Recorded Mail To:  
Wells Fargo Home Mortgage  
C/O NTC 2100 Alt. 19 North  
Palm Harbor, FL 34683

**Loan #: 0090001355**

**DEED OF FULL RECONVEYANCE**

WHEREAS, WELLS FARGO BANK, N.A. as the current Beneficiary of the certain Deed of Trust granted by **JAMES MYERS AND CYNTHIA MYERS** as the Trustor, and recorded 07/20/2010 in the Office of the Recorder of DOUGLAS County, State of Nevada, under Instrument # 767307, and/or Book 710, Page 3698, of Official Records, has appointed WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as substituted Trustee in accordance with the provisions of said Deed of Trust;

WHEREAS the current beneficiary having represented to the Trustee that the obligation secured by said Deed of Trust has been fully paid and/or satisfied,

NOW THEREFORE, WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION, as substituted Trustee, DOES HEREBY GRANT AND RECONVEY unto the parties entitled thereto, without warranty, all the estate and interest granted to said Trustee under said Deed of Trust in the lands therein described, situated in the County of DOUGLAS, State of Nevada. Reference being hereby made specifically to said Deed of Trust and the record thereof for a particular description of said lands.

Dated on 09/ 13 /2012 (MM/DD/YYYY)

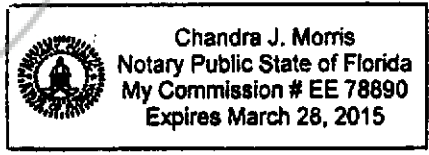
**WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION**

\_\_\_\_\_  
**ASHLEY BRABAND** TITLE OFFICER

STATE OF FLORIDA COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me 09/ 13 /2012 (MM/DD/YYYY), by **ASHLEY BRABAND** as TITLE OFFICER for WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION, who, as such TITLE OFFICER being authorized to do so, executed the foregoing instrument for the purposes therein contained. He/she/they is (are) personally known to me.

\_\_\_\_\_  
**CHANDRA J. MORRIS**  
Notary Public - State of FLORIDA  
Commission expires: 03/28/2015



Prepared By: E.Lance/NTC, 2100 Alt. 19 North, Palm Harbor, FL 34683 (800)346-9152

WFHRC 17559637 -@ CJ4162481 [C] FORM1\RCNNV61



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