

MAIL TAX STATEMENT TO:

TIMOTHY SOULE  
1204 SAND CT  
WELLINGTON NV 89444-9477

RECORDING REQUESTED BY

When Recorded Mail To:

TIMOTHY SOULE  
1204 SAND CT  
WELLINGTON NV 89444-9477

APN# 1022-10-001-065  
LOAN/BORROWER: LLU00-0132F/SOULE T.



KAREN ELLISON, RECORDER

MIN # 100019943120001324  
MERS PHONE 1-888-679-6377

**FULL RECONVEYANCE**

GUILD ADMINISTRATION CORPORATION, a California corporation as Trustee under that certain Deed of Trust dated MARCH 25, 2015 executed by TIMOTHY SOULE AND BOBBIE SOULE, HUSBAND AND WIFE, AS JOINT TENANTS \* as Trustor, and recorded as Instrument No. 2015-859325 on MARCH 27, 2015 in Book ---- at Page ---- of Official Records, in the office of the County Recorder of DOUGLAS County, Nevada, having been requested in writing, by the holder of the obligations secured by said Deed of Trust, to reconvey the estate granted to Trustee under said 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 said Deed of Trust.

Dated: APR 29 2016  
(SEAL)

GUILD ADMINISTRATION CORPORATION  
as Trustee  
By [Signature]  
GAIL WINDUS, ASSISTANT SECRETARY

\*WITH RIGHT OF SURVIVORSHIP

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 SAN DIEGO s.s

On APR 29 2016 before me, B. VARON NEWTON, Notary Public, personally appeared GAIL WINDUS, who 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 signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

*I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.*

WITNESS my hand and official seal.

Signature [Signature] (Seal)  
B. VARON NEWTON

