

DOUGLAS COUNTY, NV

2019-928843

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SECURITY CONNECTIONS INC

KAREN ELLISON, RECORDER

**NEVADA**

**RECORD 2ND**

COUNTY OF DOUGLAS

LOAN NO.: 0015135957

PARCEL NO. 1420-28-811-006



WHEN RECORDED MAIL TO: **FIRST AMERICAN MORTGAGE SOLUTIONS**

1795 INTERNATIONAL WAY

IDAHO FALLS, ID 83402

PH. 208-528-9895

MAIL TAX STATEMENTS TO: **BRIAN BURT**

1362 KIM PL MINDEN NV 89423

**FULL RECONVEYANCE**

The Undersigned does hereby affirm that this document submitted for recording does not contain the social security number of any person or persons. (per NRS 239B.030)

WHEREAS, **FIRST AMERICAN TITLE INSURANCE COMPANY**, is the Trustee, Successor Trustee, or Substitute Trustee, under that certain Deed of Trust dated **MAY 29, 2015**, executed by **BRIAN ROBERT BURT AND KAYLA NOEL BURT, HUSBAND AND WIFE AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP**, Trustor, to **WESTERN TITLE COMPANY**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS NOMINEE FOR **GREATER NEVADA MORTGAGE, ITS SUCCESSORS AND ASSIGNS**, Original Beneficiary, and recorded on **JUNE 01, 2015** as Instrument No. **2015-863050** of the Official Records in the County Recorder's office of **DOUGLAS** County, State of **NEVADA** and more particularly described on said Deed of Trust referred to herein.

And having received from **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS NOMINEE FOR **GREATER NEVADA MORTGAGE, ITS SUCCESSORS AND ASSIGNS**, located at **P.O. BOX 2026, FLINT, MICHIGAN 48501-2026**, the Current Beneficiary, a written request to reconvey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust has been surrendered to said Trustee for cancellation, and the Undersigned does hereby **RECONVEY**, without warranty, to the person or persons legally entitled thereto, the estate now held by it thereunder.

IN WITNESS WHEREOF, the Undersigned has caused this Instrument to be executed on this **MAY 08, 2019**.

**FIRST AMERICAN TITLE INSURANCE COMPANY**

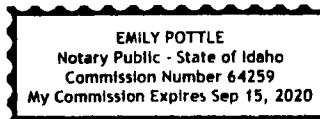
**LISA M. CARTER, ASSISTANT SECRETARY**

STATE OF IDAHO

COUNTY OF BONNEVILLE ) ss.

On **MAY 08, 2019**, before me, **EMILY POTTLE**, personally appeared **LISA M. CARTER** known to me to be the **ASSISTANT SECRETARY** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.

**EMILY POTTLE (COMMISSION EXP. 09/15/2020)**  
NOTARY PUBLIC



POD: 20190503

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