

DOUGLAS COUNTY, NV **2019-929224**
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SECURITY CONNECTIONS INC
KAREN ELLISON, RECORDER

NEVADA
COUNTY OF DOUGLAS

RECORD 2ND

PARCEL NO. 1418-03-711-005



WHEN RECORDED MAIL TO: **FIRST AMERICAN MORTGAGE SOLUTIONS**
1795 INTERNATIONAL WAY
IDAHO FALLS, ID 83402
PH. 208-528-9895
MAIL TAX STATEMENTS TO: **SCOTT M POGODA**
PO BOX 1637 ZEPHYR COVE NV 89448

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 **JUNE 28, 2005**, executed by **SCOTT POGODA, A MARRIED MAN AS HIS SOLE AND SEPARATE PROPERTY**, Trustor, to **GREENHEAD INVESTMENTS, INC., A CALIFORNIA CORPORATION**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR SIERRA PACIFIC MORTGAGE COMPANY, INC., ITS SUCCESSORS AND ASSIGNS**, Original Beneficiary, and recorded on **JULY 08, 2005** in Book **0705** at Page **4080** as Instrument No. **0649224** 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 **CHEVY CHASE FUNDING LLC, MORTGAGE-BACKED CERTIFICATES, SERIES 2005-4, U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE**, located at **8742 LUCENT BLVD STE 300, HIGHLANDS RANCH, CO 80129**, 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 16, 2019**.

FIRST AMERICAN TITLE INSURANCE COMPANY


LISA M. CARTER, ASSISTANT SECRETARY

STATE OF **IDAHO** COUNTY OF **BONNEVILLE**) ss.

On **MAY 16, 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

EMILY POTTLE
Notary Public - State of Idaho
Commission Number **64259**
My Commission Expires **Sep 15, 2020**

POD: 20190430
SL8120112IM - LR - NV
