DOUGLAS COUNTY, NV

Rec:\$35.00 Total:\$35.00 2019-936660

10/15/2019 02:02 PM

US BANK

Pgs=2

## \*APN # 1220-11-001-012

Recording Requested By: U.S. BANK HOME MORTGAGE
And When Recorded Mail To: U.S. BANK MORTGAGE

SERVICING P.O. BOX 6060 NEWPORT BEACH, CA 92658-9880

MERS MIN#: 100670800021073861

PHONE#: (888) 679-6377



KAREN ELLISON, RECORDER

Investor #: K70

**FULL RECONVEYANCE** 

Service#: 2047333RL1

Loan#: 9902975495

The undersigned does hereby affirm that this document submitted for recording does not contain personal information about any person.

U.S. BANK NATIONAL ASSOCIATION, as Trustee, or Successor Trustee, Or Substituted Trustee, under Deed of Trust dated AUGUST 02, 2016, made by MICHAEL R POLISH AND BARBARA J POLISH, HUSBAND AND WIFE, Trustor and recorded as Instrument No. 2016-885511 on AUGUST 04, 2016, in Book No. ---, at Page No. ---, of Official Records in the office of the Recorder of DOUGLAS County, NEVADA. Said Deed of Trust describes the following property: As more fully described in said Deed of Trust. And having received from holder of the obligations thereunder a written request to reconvey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust and the note or notes secured thereby having been surrendered to said Trustee for cancellation, does hereby RECONVEY, without warranty, to the person or persons legally entitled thereto, the estate now held by it thereunder.

In Witness Whereof, U.S. BANK NATIONAL ASSOCIATION, as Trustee, has caused its name to be hereto affixed by its Officer thereunto duly authorized. \* COMPANY OF NEVADA

Dated: OCTOBER 10, 2019

U.S. BANK NATIONAL ASSOCIATION

Teresa Greene, Officer

Loan#: 9902975495 Srv#: 2047333RL1

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 $\begin{array}{lll} \text{State of} & \underline{\textbf{KENTUCKY}} & \\ \text{County of} & \underline{\textbf{DAVIESS}} & \\ \end{array} \} \text{ ss.}$ 

On OCTOBER 10, 2019, before me, Autumn Williams, a Notary Public, personally appeared Teresa Greene, 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 signature(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 KENTUCKY that the foregoing paragraph is true and correct. Witness my hand and official seal.

(Notary Name): Autumn Williams Commission Expires: 04/29/2023

Commission No: 622344

