DOUGLAS COUNTY, NV

Rec:\$35.00

\$35.00 Pgs=1

2019-939584 12/13/2019 03:19 PM

ETRCO

KAREN ELLISON, RECORDER

RECORDING REQUESTED BY
Parcel Nov. 1221 . 17 -000 - 015

AND WHEN RECORDED MAIL TO

Name Evergreen have bearing Street (121 Lakaside Tor. Swite 160 Address

City, State ROV, NV

Order No.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Request for Notice of Default

| Request is hereby made that a copy of any Notice of Default and a copy | of any Notice of Sale under the Deed of Trust |
|--|--|
| recorded as Document No. Consuccest Necessation | of Official Records of Douglas |
| County, Nevada, executed by STEPHEN COURTLAND COWART, as Ti | |
| woman, is named as Beneficiary, and WESTERN TITLE COMPANY, LL | C., a Nevada Limited Liability Company, as |
| TRUSTEE, be mailed to Joe Gaudreault at Elegreen Note Dervi | ang at |
| 6/21 horeside Dr. Swe 150 Reno, NV 89511 | |
| + and Teleson M. Coucast husband and wise as Joint | teronto |
| NOTICE: A copy of any Notice of Default and any Notice of Sale will be | sent only to the address contained in this recorded |
| Request: If your address changes, a new Request must be recorded. | |
| Dated: 12 4 19 | |
| Dateu. | |
| | 7-0 |
| STATE OF NEVADATOR | |
| COUNTY OF S.S. | ahre ohn |
| Darahar 11 2019 | Shiela K. Smith |
| On Docomba H before me, | |
| Traci Adams | Vanish and the second s |
| | |
| Notary Public, personally appeared | |
| Shipla K Smills | |
| Shiela K. Smith | |
| | ************************************** |
| 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. | |
| certify under PENALTY OF PERJURY under the laws of the State of | |
| Nevada that the foregoing paragraph is true and correct. | |
| \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| WITNESS my hand and official seal. | (This area for official notarial seal) |
| / // , ٧/ | |
| Signature | |
| | |

