

MAIL TAX STATEMENT TO:

WILLIAM E. NICHOLS  
2620 KAYNE AVE  
MINDEN NV 89423-9039

RECORDING REQUESTED BY

When Recorded Mail To:

WILLIAM E. NICHOLS  
2620 KAYNE AVE  
MINDEN NV 89423-9039

APN # 1420-34-410-007

LOAN/BORROWER: GNX00-2403F/NICHOLS W.



KAREN ELLISON, RECORDER

MIN # 100019977910024039

MERS PHONE 1-888-679-6377

**FULL RECONVEYANCE**

GUILD ADMINISTRATION CORPORATION, a California corporation as Trustee under that certain Deed of Trust dated AUGUST 29, 2016 executed by WILLIAM E NICHOLS AND MONICA R NICHOLS, HUSBAND AND WIFE as Trustor, and recorded as Instrument No. 2016-886867 on AUGUST 30, 2016 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: MARCH 25, 2020  
(SEAL)

GUILD ADMINISTRATION CORPORATION,  
as Trustee A CALIFORNIA CORPORATION

By: [Signature]  
GAIL WINDUS, ASSISTANT SECRETARY

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 MARCH 25, 2020 before me, EFFIE SCARPIAS

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)  
EFFIE SCARPIAS, NOTARY PUBLIC

