

DOUGLAS COUNTY, NV

2020-956374

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FIRST AMERICAN MORTGAGE SOLUTIONS

KAREN ELLISON, RECORDER

**NEVADA**

COUNTY OF DOUGLAS

LOAN NO.: 3390799099

PARCEL No. 1220-03-111-026



*RECORD 2ND*

WHEN RECORDED MAIL TO: FIRST AMERICAN MORTGAGE SOLUTIONS

1795 INTERNATIONAL WAY

IDAHO FALLS, ID 83402

PH. 208-528-9895

MAIL TAX STATEMENTS TO: SALLY KIMBRELL

GARDNERVILLE NV 894106039

**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 **NOVEMBER 10, 2017**, executed by **SALLY A. KIMBRELL AND STEVEN R. KIMBRELL, WIFE AND HUSBAND**, Trustor, to **OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS BENEFICIARY, AS NOMINEE FOR **QUICKEN LOANS INC., ITS SUCCESSORS AND ASSIGNS**, Original Beneficiary, and recorded on **NOVEMBER 13, 2017** as Instrument No. **2017-906829** 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 BENEFICIARY, AS NOMINEE FOR **QUICKEN LOANS INC., ITS SUCCESSORS AND ASSIGNS**, located at **P.O. BOX 2026, FLINT, MICHIGAN 48501-2026**, the 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 **NOVEMBER 10, 2020**.

**FIRST AMERICAN TITLE INSURANCE COMPANY**

**ARIEL GERARDO MORAN, VICE  
PRESIDENT**

POD: 20201102

QL8040120IM - LR - NV



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DOCUMENT 2 OF 2

MIN: 100039033907990992  
MERS PHONE: 1-888-679-6377

Attached to the Full Reconveyance dated November 10, 2020

STATE OF ARIZONA COUNTY OF MARICOPA ) ss.

On **NOVEMBER 10, 2020**, before me, **K STURDIVANT**, Notary Public, personally appeared **ARIEL GERARDO MORAN, VICE PRESIDENT** of **FIRST AMERICAN TITLE INSURANCE COMPANY**, whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or entity, who they acted on the behalf of, executed the instrument.



**K STURDIVANT (COMMISSION EXP. 12/02/2022)**  
NOTARY PUBLIC

