

Form FMA CA/NV 1955-4 (06-10-92)

Recording Requested By  
The United States of America, acting  
through Farmers Home Administration

WHEN RECORDED MAIL TO:

Name  
USDA FARMERS HOME ADMINISTRATION  
Street  
2002 IDAHO STREET  
Address  
ELKO NV 89801  
City &  
State

145134

EUREKA COUNTY, NEVADA  
M.N. REBALEATI, RECORDER  
FILE NO. 145134

93 APR -8 10:30

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OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
Flonster Jette

Space Above This Line for Recorder's Use

Position 5  
UNITED STATES DEPARTMENT OF AGRICULTURE  
FARMERS HOME ADMINISTRATION

FULL RECONVEYANCE

Acting  
WHEREAS, the undersigned, State Director of the Farmers Home Administration  
for the State of NEVADA (7 USC 1989, 42 USC 1980, 42 USC 2942;  
7CFR 1900.2) is now Trustee under the Deed(s) of Trust executed by  
RONALD C. CHANEY and SANDRA L. CHANEY  
to REED J. PAGE, STATE DIRECTOR  
of the FARMERS HOME ADMINISTRATION  
for the State of NEVADA, and  
his or her successors in office, Trustee, dated and recorded in the Official  
Records of EUREKA County, NEVADA, as follows:

Date of Instrument	Date of Recording	Volume or Book	Page or File No. and/or Document No.
06-15-78	06-15-78	64	Page 173 / File No. 65307
06-15-78	06-15-78	64	Page 178 / File No. 65308

WHEREAS, the undersigned has been duly and legally requested to reconvey  
the estate now held by Trustee under said Deed(s) of Trust in and to the real  
property hereinafter described;

NOW THEREFORE the undersigned does hereby reconvey, but without warranty,  
to the person or persons legally entitled thereto, the estate of Trustee in  
all of the lands described in said Deed(s) of Trust, reference being hereby  
made to said Deed(s) of Trust and the record thereof for a particular  
description of said real property.

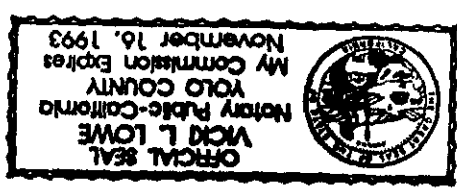
DATED: March 16, 1993.

*Darrel G. Zenger*  
DARREL G. ZENGER, Acting  
State Director of the Farmers Home  
Administration for the State of  
NEVADA

State of California )  
County of Yolo )

CAPACITY CLAIMED BY  
SIGNER  
( ) INDIVIDUAL(S)  
( ) CORPORATE  
OFFICER(S)  
Title(s)  
( ) PARTNER(S)  
( ) ATTORNEY-IN-FACT  
(X) TRUSTEE(S)  
( ) SUBSCRIBING WITNESS  
( ) GUARDIAN/CONSERVATOR  
( ) OTHER:  
Name of person(s) or  
entity(ies)  
SIGNER IS REPRESENTING:  
Name of person(s) or  
entity(ies)

(X) personally known to me - OR  
( ) 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.  
Witness my hand and official seal.



*Vicki L. Lowe*  
Signature of Notary  
VICKI L. LOWE

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