

NEVADA

COUNTY OF EUREKA

LOAN NO.: 0440439318

PARCEL NO. 001-081-10



RECORD 2ND

EUREKA COUNTY, NV

2019-239619

Rec:\$35.00

\$35.00

Pgs=2

10/14/2019 02:05 PM

FIRST AMERICAN MORTGAGE SOLUTIONS

LISA HOEHNE, CLERK RECORDER

WHEN RECORDED MAIL TO: **FIRST AMERICAN MORTGAGE SOLUTIONS**

1795 INTERNATIONAL WAY

IDAHO FALLS, ID 83402

PH. 208-528-9895

MAIL TAX STATEMENTS TO: **MARSHALL CHRISTENSEN**

PO Box 903 EUREKA NV 893160000

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 **JULY 13, 2018**, executed by **MARSHALL CHRISTENSEN AND GLORIA CHRISTENSEN, HUSBAND AND WIFE**, Trustor, to **FIRST GUARANTY MORTGAGE CORPORATION**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS NOMINEE FOR STEWART TITLE, ITS SUCCESSORS AND ASSIGNS, Original Beneficiary, and recorded on **JULY 13, 2018** as Instrument No. **2018-235557** of the Official Records in the County Recorder's office of **EUREKA 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 NOMINEE FOR STEWART TITLE, 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 **OCTOBER 08, 2019**.

FIRST AMERICAN TITLE INSURANCE COMPANY


LISA M. CARTER, ASSISTANT SECRETARY

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DOCUMENT 1 OF 2

MIN: 100031400002497546
MERS PHONE: 1-888-679-6377

STATE OF IDAHO COUNTY OF BONNEVILLE) ss.

On **OCTOBER 08, 2019**, before me, **EMILY POTTLE**, personally appeared **LISA M. CARTER** known to me to be the **ASSISTANT SECRETARY** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.


EMILY POTTLE (COMMISSION EXP.
09/15/2020)
NOTARY PUBLIC

