DOC # 0150889

Official Record

Recording requested By DYLAN FREHNER ATTY

Lincoln County - NV Leslie Boucher - Recorder

Fee: \$15.00

Page 1 of 2 Recorded By: HB

RPTT: Book- 309 Page- 0017



APN_011-200-14 APN____ APN____

FULL RECONVEYANCE

Title of Document

Affi	rmation Statement
X	ette uter hall de comme brokedler gerrandishing benefic
	t the attached document, including any exhibits, hereby social security number, driver's license or identification care
	fined by NRS 603A.040) of any person or persons. (Per NRS
239B.030)	
	\
	t the attached document, including any exhibits, hereby
	al security number, driver's license or identification card
	ined by NRS 603A.040) of a person or persons as required
by law:	
/ / /	
	/ / ~
Attorney	\ \
Signature Fide	
Dylan V. Frehner, Esq.	
3 200	/ /
01/30/17	
Distr	

Grantees address and mail tax statement:

American Surety Company

P.O. Box 68932

Indianapolis, IN 46268

FULL RECONVEYANCE

In Consideration of the payment of the debt or the exoneration of the obligation secured by the Deed of Trust executed by <u>ALLEN HILL</u> to AMERICAN SURETY COMPANY, as Beneficiary,	
recorded November 25, 2003 in BOOK 180 at Page 347 of Official	
Records, in the Office of the Recorder of Lincoln County, State of Nevada, the undersigned, at the	
request of the holder of the note or obligation thereby secured, does hereby remiss, release and reconvey	
to the person lawfully entitled thereto, without warranty, all the estate now in said Trustee in the property	
granted by said Deed of Trust, for a particular description of said property:	
In Witness Whereof, American Surety Company, as Beneficiary, has caused its name to be	
signed to these presents this 24 th day of January , 20 17	
AMERISAN SURETY COMPANY	
Ву	
Paul J. Longstretth, CFO, Secretary & Treasurer State of Indiana	
County of Hamilton	
On <u>January 24, 2017</u> before me, the undersigned, a Notary Public in and for said State,	
personally appeared Paul J. Longstreth known to me to be the <u>CFO</u> , <u>Secretary & </u>	
<u>Treasurer</u> of the Corporation that executed the within Instrument, known to me to be	
the person who executed the within Instrument on behalf of the corporation therein named, and	
acknowledged to me that such Corporation executed the within Instrument pursuant to its by-laws or a	
resolution of its board of directors.	
WITNESS MY HAND AND OFFICIAL SEAL	
SIGNATURE AUTOLOGICA My Commission Expires: 08/08/2023	
When Recorded Mail To	
American Surety Company P.O. Box 68932 KATHLEEN BOYER	
1 10. DOX 00002	
Indianapolis, IN 46268 Notany Public, Stote of Indiana Marion County	
SEAL My Commission Epxires August 8, 2023	
Sale Control of the C	