RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO:

Name

Street Address

City & State Zip

Title Order No.

Escrow No.



SPACE ABOVE THIS LINE FOR RECORDER'S USE

SATISFACTION OF MORTGAGE

		Assessor Parcel Number:
KNOW ALL MEN BY T	HESE PRESENTS, that	
DO HEREBY CERTIFY	that the following Mortgage IS	PAID, and do hereby consent that the same be
discharged of record. N	Nortgage dated	, made by:
		to
		in the principa
sum of \$		as Instrument No
Зооk Page	in the office of the Co	ounty Recorder of County
document to which this c	officer completing this certificate ve	erifies only the identity of the individual who signed the uthfulness, accuracy, or validity of that document.
STATE OF CALIFORNIA COUNTY OF		
	before me,	(here insert name and title of the officer)
who proved to me on the instrument and acknowled his/her/their signature(s) o instrument. I certify under PENALTY C	lged to me that he/she/they executed	the person(s) whose name(s) is/are subscribed to the within the same in his/her/their authorized capacity(ies), and that by entity upon behalf of which the person(s) acted, executed the
WITNESS my hand and official		re of
WITNESS my hand and official	g paragraph is true and correct.	te of