

8/22/2011 Page

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1 12:27PM

## WHEN RECORDED RETURN

SKAGIT STATE BANK POST OFFICE BOX 285 BURLINGTON WA 98233

Filed for Record at Request of Land Title Company of Skagit County

Order No.: 125065-SS

| FULL I  | RECONVEYANCE   |
|---|--|
| The undersigned as trustee under that certain Dee   | d of Trust, dated MARCH 23 2007 in which   |
| ROGER A TJEERDSMA AND MARY J TJE  | ERDSMA H/W is grantor and  |
| SKAGIT STATE BANK   | is beneficiary, recorded on  |
| MARCH 26 2007   | as Auditor's No.   |
| 200703260129 records of <b>SKAGIT</b>   |  |
|   | equest to reconvey, reciting that the obligations secured by hereby reconvey, without warranty, to the persons entitled  |
|   | eld by said trustee in and to the property described in said   |
| Deed of Trust, situated inSKAGIT County, Wash   |  |
|   | and the state of t |
|   | <u>Ç</u>   |
| ***   |  |
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| Dated AUGUST 22 2011  |  |
|   | LAND TITLE COMPANY OF SKAGIT CO  |
|   | 1 Indiana  |
|   | Ву:  |
|   | Bill Ronhaar (Name-Title) Manager  |
|   |  |
| STATE OF WASHINGTON SS.   | STATE OF WASHINGTON SS.  |
| COUNTY OF   | COUNTY OF SKAGIT   |
| On this day personally appeared before me   | On this 22 <sup>ND</sup> day of AUGUST 2011  |
| On this day personally appeared before the  |  |
|   | before me, that undersigned, a Notary Public in and for the State of   |
| to me known to be the individual described  | Washington, duly commissioned and sworn, personally appeared BILL RONHAAR. to me known to be the   |
| in and who executed the within and foregoing instrument, and acknowledge that   | BILL RONHAAR, to me known to be the authorized signatory of LAND TITLE COMPANY   |
| foregoing insument, and acknowledge that  | The corporation that executed the foregoing instrument, and  |
| signed the same as  | acknowledged said instrument to be the free and voluntary act and deed   |
| •   | of said corporation, for the uses and purposes therein mentioned, and oπ   |
| free and voluntary act and deed, for the uses   | oath stated that he is authorized to execute to the said instrument  |
| and purposes therein mentioned  | Witness my hand and official seal hereto affixed the day and year first  |
|   | above written.   |
| GIVEN under my hand and official seal this  | 50 0 0 VIO   |
| day of  | Sharon or, Without   |
|   | Sharon R. Anthony  |
| Notary Public in and for the State of Washington  | Notary Public in and for the State of Washington, Residing at MOUNT VERNON   |
| My Appointment expires  | AN My appointment expires 9/6/2013   |
| Will AR.  | ··. */> // //  |
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| EXP. 9-6  | -2013 _  |
| E Si Auni   | .o /δ ∰ ///  |
|   | • <u>`.</u> 6  |
| "IIIII" OF WA   | SHILMIN  |
| Notary Public in and for the State of Washington Residing at My Appointment expires  My Appointment expires  EXP. 9-6  EXP. 9-6  WA | unun.  |
|   |  |