When Recorded Return To:

LIEN RELEASE DEPT. **WELLS FARGO** MAC X9400-L1C 11200 W PARKLAND AVE MILWAUKEE, WI 53224



11/2/2012 Page

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1 10:11AM

Deed of Reconveyance

WFHM - CLIENT WFF #: "PFAFF" Lender ID:FDR Skagit, Washington WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION is the present Trustee of record under the following described Deed of Trust:

Trustor: RANDY D PFAFF, TARA D NORDBY AS TENANTS IN COMMON
Beneficiary: WELLS FARGO BANK, N.A. successor by merger to WELLS FARGO FINANCIAL BANK

Original Beneficiary: GREEN TREE RETAIL SERVICES BANK, INC.

Original Trustee: MICHAEL D. BOHANNON, ATTORNEY

Dated: 10/15/1999 Recorded: 31/22/1999 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

199911220088 In the Records of the County Recorder of Skagit, State of Washington.

The undersigned hereby directs the County Recorder/Clerk/Register to cancel of record said security instrument without impairing or satisfying the remaining obligation under the promissory note/credit agreement that was secured by said security instrument.

Property Address: 18808 FISHERMANS LOOP, BURLINGTON, WA 98233

NOW THEREFORE, the present Trustee having received from the present owner of the beneficial interest under said Deed of Trust and the obligations secured thereby a written request to reconvey by reason of the obligations secured by said Deed of Trust.

DOES HEREBY RECONVEY, without warranty, to the person or persons legally entitled thereto, the estate, title and interest now held by it under said Deed of Trust, describing the land therein as more fully described in said Deed of Trust.

By WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee On October 22nd, 2012

LINDA KRAUSE, TITLE OFFICER

STATE OF Wisconsin COUNTY OF Milwaukee

On October 22nd, 2012, before me, GALINA ASRIYANS, a Notary Public in and for Milwaukee in the State of Wisconsin, personally appeared LINDA KRAUSE, TITLE OFFICER, 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, and that by his/her/their signature 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,

GALINA ASRIYANS

Notary Expires: 10/15/2014

Galina Asriyans Notary Public State of Wisconsin

(This area for notarial seal)