When Recorded Return To:

LIEN RELEASE DEPT WELLS FARGO BANK, N.A HOME EQUITY SERVICING OPS P.O. BOX 31557 BILLINGS, MT 59107



Skagit County Auditor 2/12/2014 Page

\$72.00

1 11:52AM 1 of



Deed of Reconveyance

WF HOME EQUITY #:65091278281998 "NELSON" 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: DENISE L NELSON

Beneficiary: WELLS FARGO BANK, N.A. Original Beneficiary: WELLS FARGO BANK N.A.

Original Trustee: CHICAGO TITLE INSURANCE COMPANY

Dated: 07/29/2005 Recorded: 08/01/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200508010149 In the Records of the County Recorder of Skagit, State of Washington. Property Address: 1419 DIGBY LANE #107, MOUNT VERNON, WA 98273-0000

AND WHEREAS, the above said Deed of Trust has been paid in full;

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 January 27th, 2014

DELAINE KEEFER, TITLE OFFICER

STATE OF Montana **COUNTY OF Yellowstone**

On January 27th, 2014, before me, DONNA JOHNSON, a Notary Public, personally appeared DELAINE KEEFER, 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,

DONNA JOHNSON

Notary Expires: 04/05/2017

NA JOHN OTARIA

DONNA JOHNSON NOTARY PUBLIC for the State of Montana Residing at Billings, Montana My Commission Expires April 05, 2017

(This area for notarial seal)