

When Recorded Return To:

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



201411140039

Skagit County Auditor \$72.00  
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**Deed of Reconveyance**

WF HOME EQUITY #:65485737781998 "WATSON III" Skagit, Washington  
WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION f/k/a  
WELLS FARGO FINANCIAL NATIONAL BANK is the present Trustee of record under the following described  
Deed of Trust:

Trustor: EDWARD E WATSON III AND KATHRYN M WATSON  
Beneficiary: WELLS FARGO BANK, N.A.  
Original Beneficiary: WELLS FARGO BANK, N.A.  
Original Trustee: WELLS FARGO FINANCIAL NATIONAL BANK  
Dated: 06/19/2003 Recorded: 07/24/2003 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:  
200307240058 In the Records of the County Recorder of Skagit, State of Washington.  
Property Address: 56289 MARTIN RANCH ROAD, ROCKPORT, WA 98283

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

NOW THEREFORE, the present Trustee having received from the present Beneficiary 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 f/k/a WELLS  
FARGO FINANCIAL NATIONAL BANK as Trustee  
On October 30th, 2014

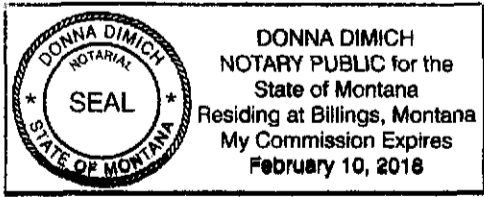
  
\_\_\_\_\_  
DELAINE KEEFER, TITLE OFFICER

STATE OF Montana  
COUNTY OF Yellowstone

On October 30th, 2014, before me, DONNA DIMICH, 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 DIMICH  
Notary Expires: 02/10/2018



(This area for notarial seal)