

When Recorded Return To:

LINDA JENNINGS
CITIZENS ONE HOME LOANS
P O BOX 6260
VAM 405
Glen Allen, VA 23058-9962



201804030038

Skagit County Auditor

4/3/2018 Page

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\$74.00
1 10:50AM



Deed of Reconveyance

CITIZENS ONE HOME LOANS # XXXXX9911 "JONES" Lender ID:047/8900459911 Skagit, Washington
WHEREAS RECONVEYANCE PROFESSIONALS, INC. is the present Trustee of record under the following described Deed of Trust.

Trustor: ZACHARY J JONES AND TERESA M JONES, HUSBAND AND WIFE
Beneficiary: CITIZENS BANK, N.A. F/K/A RBS CITIZENS, N.A.
Original Beneficiary: FIRST HORIZON HOME LOAN CORPORATION
Original Trustee: CHICAGO TITLE INS. CO.
Dated: 04/03/2007 Recorded: 04/12/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200704120136 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 551 NEFF CIRCLE, BURLINGTON, WA 98233

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 RECONVEYANCE PROFESSIONALS, INC. as Trustee
On _____

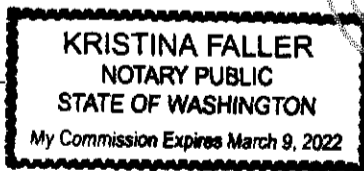
JAMES R. HOAGLAND, Secretary

STATE OF _____
COUNTY OF _____

On _____, before me, _____, a Notary Public in and for _____ in the State of _____, personally appeared _____, 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,

Notary Expires: / /



(This area for notarial seal)

State of WASHINGTON)
County of SNOHOMISH

On MARCH 28, 2018 certify that I know or have satisfactory evidence that JAMES R. HOAGLAND signed this instrument, on oath stated that he was authorized to execute this instrument and acknowledged that as SECRETARY of RECONVEYANCE PROFESSIONALS, INC. to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument..

Notary Name: KRISTINA FALLER
Notary Public in and for the State of WASHINGTON
Notary Expires: 03/09/2022