

**Record and Return To:**

Information Systems and Networks  
Corporation  
Information Systems and Networks  
Corporation  
2000 N. Classen Blvd.  
Suite 3200  
Oklahoma City, OK 73106

Drafted By: **Allyson Lane**

Loan #: **800103444**

**DEED OF RECONVEYANCE**

Original Trustor: **MARCELLA L WATSON AS INDIVIDUAL PERSON, ROBERT R WATSON AS INDIVIDUAL PERSON**

Original Trustee: **United States Department of Housing and Urban Development**

Original Beneficiary: **United States Department of Housing and Urban Development**

Dated: **07/27/2012** Recorded: **08/15/2012** Instrument: **201208150032** in **Skagit County, WA** Loan Amount: **\$50,000.00**

Property Address: **122 N MCKINLEY ST, BURLINGTON, WA 98233**

Parcel Tax ID: **4091-002-015-0019**

WHEREAS **United States Department of Housing and Urban Development** is the present Trustee of record under the above described Deed of Trust:

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.

Date: **02/22/2024**.

**Secretary of Housing and Urban Development by Its Attorney in Fact Information Systems and Networks Corporation**

By: 

Name: **Shannon Grayson**

Title: **Authorized Agent**

Power of Attorney previously recorded on **05/03/2022**, as Instrument No. **202205030075**, in **SKAGIT County, WA**.

STATE OF **Oklahoma**  
COUNTY OF **Oklahoma** } s.s.

On **02/22/2024**, before me, **Sofia Tisnes**, Notary Public, personally appeared **Shannon Grayson, Authorized Agent of Information Systems and Networks Corporation, Attorney in Fact for Secretary of Housing and Urban Development**, to be the person whose name is subscribed to the within instrument and acknowledged to me that she/he/they executed the same in her/his/their authorized capacity(ies), and that by her/his/their signature(s) 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 Public: **Sofia Tisnes**

My Commission Expires: **02/18/2026**

Commission #: **22002427**

