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When Recorded Return To:

LISA FENNELL LINDEN PO BOX 1509 HOOD RIVER, OR 97031 BOOK 223 PAGE 603

FILED FOR ESCORD SKALLING OD WASY BY Washington Mutual

APR 30 10 22 AH '02

PLANTY

AUDITOR

J. MICHAEL GARVIOON

8004941756

Washington Mutual - Wisconsin #:8004941756 "LINDEN" Lender ID:C06/0938644327 Skamania, Washington WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: MiCHAEL SCOTT LINDEN AND LISA FENNELL LINDEN, HUSBAND AND WIFE Beneficiary: WASHINGTON MUTUAL BANK, F.A. SUCCESSOR TO WASHINGTON MUTUAL HOME LOANS, INC. SUCCESSOR IN INTEREST BY MERGER TO FLEET MORTGAGE CORP.
Original Beneficiary: GN MORTGAGE CORPORATION, A WISCONSIN CORPORATION
Original Trustee: 6700 CORPORATION, A CALIFORNIA CORPORATION
Dated: 07/07/1997 Recorded: 07/15/1997 in Book/Reel/Liber: 167 Page/Folio: 147 as Instrument No.: 128658 In the Records of the County Recorder of Skamania, State of Washington.
Property Address: 10651 COOK-UNDERWOOD RD, UNDERWOOD, WA 98651

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 WASHINGTON RECONVEYANCE COMPANY as Trustee On April 11th, 2002

EDWARD ADAMS, ASSISTANT VICE PRESIDENT

STATE OF Wisconsin COUNTY OF Milwaukee

On April 11th, 2002, before me, GALINA SHKLOVER, a Notary Public in and for Milwaukee County, in the State of Wisconsin, personally appeared EDWARD ADAMS, ASSISTANT VICE PRESIDENT, 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 SHKLOVER Notary Expires: 01/15/2006 GALINA SHKLOVER NOTARY PUBLIC STATE OF WISCONSIN

(This area for notarial seal)

Prepared By: JOAN A. KLAUS WASHINGTON MUTUAL BANK, F.A. 11200 WEST PARKLAND AVE, MILWAUKEE, WI 53224

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