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When Recorded Return To:

DAVID HEDMAN PO BOX 1191 CARSON, WA 98610 BOOK 229 PAGE 175

FILED FOLK MESORD SKAMSON TO WASH BY Wishington Medical SEP 10 3 20 PH '02 Oxawny ALLINGTON J. MICHAEL BERVISON

Washington Mutual - Wisconsin #:8015062899 "HEDMAN" Lender PD:F53/1669778660 Skamania, Washington WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: DAVID HEDMAN AND LOIS HEDMAN 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: FLEET MORTGAGE CORP., A SOUTH CAROLINA CORPORATION
Original Trustee: FIRST AMERICAN TITLE INSURANCE COMPANY, A CALIFORNIA CORPORATION
Dated: 11/23/1998 Recorded: 12/02/1998 in Book/Reel/Liber: 183 Page/Folio: 858 as Instrument No.: 133577 In
the Records of the County Recorder of Skamania, State of Weshington.
Property Address: 61 ALLEN RD, CARSON, WA 98610

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 August 13th, 2002

SLIE MULHERN, ASSISTANT VICE PRESIDENT

Pagazonal Uniformation of the Pagazona Uniformation Office Uniformation Of

STATE OF Wisconsin COUNTY OF Milwauke

On August 13th, 2002, before me, MARY F WICHNER, a Notary Public in and for Milwaukee County, in the State of Wisconsin, personally appeared JULIE MULHERN, 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,

MARY F WICHNER
Notary Expires: 08/14/2005

MARY F. WICHNER Notary Public State of Wisconsin

(This area for notarial seal)