

When Recorded Return To:

WASHINGTON MUTUAL  
PO BOX 45179  
JACKSONVILLE, FL 32232-5179

Doc # 2007165189  
Page 1 of 1  
Date: 03/02/2007 01:00P  
Filed by: WASHINGTON MUTUAL HOME LOANS  
Filed & Recorded in Official Records  
of SKAMANIA COUNTY  
SKAMANIA COUNTY AUDITOR  
J MICHAEL GARVISON  
Fee: \$32.00



**Deed of Reconveyance**

WASHINGTON MUTUAL - CLIENT 156 #:0005387741 "ERVIN" Lender ID:516/043/1674122901 Skamania, Washington PIF:  
02/02/2007

WHEREAS WASHINGTON RECONVEYANCE COMPANY is the present Trustee of record under the following  
described Deed of Trust:

Trustor: MARSHA A ERVIN, AN UNMARRIED INDIVIDUAL

Beneficiary: WASHINGTON MUTUAL BANK

Original Beneficiary: WASHINGTON MUTUAL BANK

Original Trustee: SKAMANIA COUNTY TITLE

Dated: 09/25/1995 Recorded: 10/12/1995 in Book/Reel/Liber: 152 Page/Folio: 922 as Instrument No.: 123512 In  
the Records of the County Recorder of Skamania, State of Washington.

Property Address: MP 055 RIVER RD, WASHOUGAL, WA 98671

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 February 26th, 2007

JOCELYN TATE, LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida  
COUNTY OF Duval

On February 26th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida,  
personally appeared JOCELYN TATE, LIEN RELEASE ASSISTANT SECRETARY, personally known to me to be  
the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the  
same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon  
behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

  
Notary Expires: 10/24/08

**Shilonda M. Peterson**

Commission # DD365375

Expires October 24, 2008

Bonded Troy Fair - Insurance, Inc. 800-385-7019

(This area for notarial seal)