

When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179

Doc # 2007165583
Page 1 of 1
Date: 04/02/2007 03:15P
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 #:0099373771 "GARVISON" Lender ID:001/011/0099373771 Skamania, Washington PIF: 03/22/2007

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

Trustor: ELIZABETH L GARVISON AND JOHN M GARVISON, WIFE AND HUSBAND

Beneficiary: WASHINGTON MUTUAL BANK

Original Beneficiary: WASHINGTON MUTUAL BANK, A WASHINGTON CORPORATION

Original Trustee: FIDELITY TITLE, A WASHINGTON CORPORATION

Dated: 11/21/2002 Recorded: 11/27/2002 in Book/Reel/Liber: 233 Page/Folio: 69 as Instrument No.: 146738 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: LOT 2 APN 02 05 30 00 1803 00, 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 March 27th, 2007


JOCELYN TATE, LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida
COUNTY OF Duval

On March 27th, 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: _____



Miriam E. Hapner
Commission # DD365383
Expires October 24, 2008
Bonded Troy Pain - Insurance, Inc. 800-385-7019

(This area for notarial seal)