When Recorded Return To:

MICHELE THOMPSON Aurora Loan Services Inc. P.O. Box 1706 Scottsbluff, NE 69363-1706

Doc# 2007165967 Page 1 of 1
Date: 05/02/2007 11:47A
Filed by: AURORA LOAN SERVICES
Filed & Recorded in Official Records of SKAMANIA COUNTY SKAMANIA COUNTY AUDITOR J MICHAEL GARVISON Fee: \$32.00

Dead of Reconveyance

AURORA LOAN SERVICES INC. #:0032146565 "GRAF" Lender ID:F35/002/0032146565 Skamania, Washington MERS #: 100015902202086052 VRU #: 1-888-679-6377

WHEREAS FIDELITY NATIONAL TITLE INSURANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: PHILLIP EDWARD GRAF AND TRACEY D YERXA GRAF HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR CTX MORTGAGE

COMPANY, LLC IT'S SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR CTX

MORTGAGE COMPANY, LLC IT'S SUCESSORS AND ASSIGNS Original Trustee: FIDELITY TITLE AND ESCROW

Dated: 12/01/2005 Recorded: 12/08/2005 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2005159808 In the Records of the County Recorder of Skamania, State of Washington.
Property Address: 232 CANDY LANE, 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

By FIRELITY NATIONAL TITLE INSURANCE COMPANY as Trustee 10170,2007

JESSIQ RESIDENT

JONATHAN HINES before me, a Notary Public in and for in the State of

JESSICA N. OHDE, ASSISTANT VICE PRESIDENT, personally known to me (of proved to me on the basis of , personally appeared 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.

whand and official seal.

Jonathan Hines **NOTARY PUBLIC Fulton County** State of Georgia My Commission Expires March 16, 2011

(This area for notarial seal)