

Doc # 2008168685
Page 1 of 1
Date: 1/11/2008 02:44P
Filed by: WELLS FARGO HOME MORTGAGE
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$42.00

When Recorded Return To:

WELLS FARGO HOME MORTGAGE
MAC X9901-L1R
2701 WELLS FARGO WAY
MINNEAPOLIS, MN 55467



Deed of Reconveyance

WFHM - CLIENT 708 #:0204000822 "WYCKOFF" Lender ID:551464/0204000822 Skamania, Washington
MERS #: 100045200000657834 VRU #: 1-888-679-6377

WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION is the present Trustee of record under the following described Deed of Trust:

Trustor: TERI L. WYCKOFF AND TRACY D. WYCKOFF, WIFE AND HUSBAND
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
Original Trustee: SKAMANIA COUNTY TITLE COMPANY
Dated: 01/16/2007 Recorded: 01/23/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2007164743 In the Records of the County Recorder of Skamania, State of Washington.
Property Address: 91 HOUSE STREET, STEVENSON, WA 98648

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.

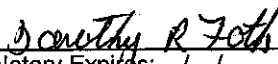
By WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee
On January 8th, 2008

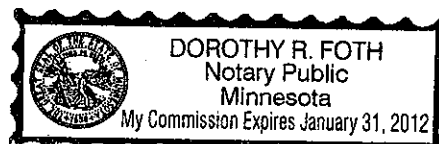

JOHN P. LARSEN, TITLE OFFICER

STATE OF Minnesota
COUNTY OF Hennepin

On January 8th, 2008, before me, a Notary Public in and for Hennepin County in the State of Minnesota, personally appeared JOHN P. LARSEN, TITLE OFFICER, 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,


Notary Expires: 1/1



(This area for notarial seal)