AFN #2008170712 Recorded 08/08/08 at 12:22 PM DocType: RECON Filed by: WELLS FARGO HOME MORTGAGE Page: 1 of 1 Auditor J. Michael Garvison Skamania County,

When Recorded Return To:

WELLS FARGO HOME MORTGAGE MAC X9400-L1C 11200 W PARKLAND AVE MILWAUKEE, WI 53224

<u>Deed of Reconveyance</u>
WFHM - CLIENT 708 #:0048897417 "PIERCE" Lender ID:718148/0849039800 Skamania, Washington WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION is the present Trustee of record under the following described Deed of Trust:

Trustor: PAUL L PIERCE AND IRENE H PIERCE, HUSBAND AND WIFE

Beneficiary: Wells Fargo Bank, N.A.
Original Beneficiary: WELLS FARGO BANK, N.A.
Original Trustee: H AND L SERVICES, INC.

Dated: 12/11/2004 Recorded: 12/17/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2004155632

In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 152 OLD LAWTON CREEK ROAD, 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 WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee

On August/4th, 2008

VICE PRESIDENT

STATE OF Wisconsin COUNTY OF Milwaukee

On August 4th, 2008, before me, TABITHA PORTER, a Notary Public in and for Milwaukee in the State of Wisconsin, personally appeared LISA MOREHEAD, ASST. 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.

TABITHA PORTER Notary Expires: 01/23/2011

TABITHA PORTER NOTARY PUBLIC STATE OF WISCONSIN (This area for notarial seal)