

When Recorded Return To:

Release Department
LOANCARE, A DIVISION OF FNF SERVICING, INC
PO Box 8068
Virginia Beach, VA 23450

Deed of Reconveyance

LOANCARE, A DIVISION OF FNF SERVICING, INC #:4771689 "ESAACSON" Lender ID:640/0201231857 Skamania, Washington

MERS #: 100073000829613686 VRU #: 1-888-679-6377

WHEREAS TRUSTEE SERVICES INC is the present Trustee of record under the following described Deed of Trust:

Trustor: ALLEN ESAACSON AND AMBER ESAACSON, HUSBAND AND WIFE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL
OWNER FREEDOM MORTGAGE CORPORATION
Original Beneficiary: FREEDOM MORTGAGE CORPORATION
Original Trustee: SKAMANIA COUNTY TITLE COMPANY
Dated: 12/03/2008 Recorded: 12/09/2008 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2008171627
In the Records of the County Recorder of Skamania, State of Washington.
Property Address: 42 OSPREY LN, CARSON, WA 98610

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 TRUSTEE SERVICES INC as Trustee
On April 23rd, 2010

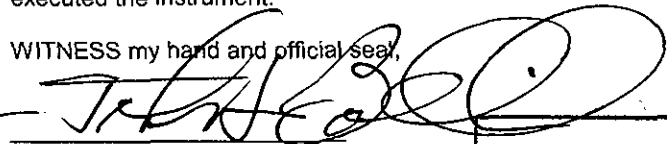


TAMMIE L ORMEROD, ASSISTANT SECRETARY

STATE OF Washington
COUNTY OF Kitsap

On April 23rd, 2010, before me, JOHN A BORRELLI, a Notary Public in and for Kitsap in the State of Washington, personally appeared TAMMIE L ORMEROD, ASSISTANT SECRETARY, 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,



JOHN A BORRELLI
Notary Expires: 11/04/2012

NOTARY PUBLIC
STATE OF WASHINGTON
JOHN A BORRELLI
COMMISSION EXPIRES 11/04/2012

(This area for notarial seal)