AFN #2014000146 Recorded 01/27/2014 at 01:54 PM DocType: RECON Filed by: CORELOGIC Page: 1 of 1 Auditor Timothy O. Todd Skamania County, WA

When Recorded Return To:

When recorded return to: CoreLogic 450 E Boundary St. Chapin, SC 29036

Deed of Reconveyance

M&T BANK #:0052583101 "FITZGERALD" Lender ID:Q12/0202639900 Skamania, Washington MERS #: 100205010001094663 SIS #: 1-888-679-6377

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

Trustor: TRISTAN J. FITZGERALD AND CORINNE A. FITZGERALD, HUSBAND AND WIFE Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ITS SUCCESSORS AND ASSIGNS Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE FOR GOLF SAVINGS BANK, A WASHINGTON STOCK SAVINGS BANK ITS SUCCESSORS AND ASSIGNS Original Trustee: SKAMANIA COUNTY TITLE COMPANY

Dated: 06/10/2009 Recorded: 06/22/2009 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

2009173162 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 1228 ISLAND WAY, NORTH BONNEVILLE, WA 98639

AND WHEREAS, the above said Deed of Trust has been paid in full;

NOW THEREFORE, the present Trustee having received from the present Beneficiary 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 FIRST AMERICAN TITLE INSURANCE COMPANY as Trustee On _/-/3-/4

LAUREL W. KEEN , AUTHORIZED SIGNATORY

STATE OF South Carolina COUNTY OF Lexington

On KICHANG CO in the State of South Carolina, personally appeared LAUREL W. KEEN, AUTHORIZED SIGNATORY, 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: 10/10/20/4

VANESSA P. BURKETT

Notary Public

State of South Carolina

My Commission Expires 10/10/2016

(This area for notarial seal)