AFN #2014001161 Recorded 07/17/2014 at 03:53 PM DocType: RECON Filed by: GEORGE C. REINMILLER TRUSTEE INC Page: 1 of 1 Auditor Timothy O. Todd Skamania County, WA

When Recorded Return To:

Hallie Richards Cenlar FSB PO BOX 77414 EWING, NJ 08628-9829



Deed of Reconveyance

Cenlar FSB #:0052061850 "PJONTEK" Lender ID: U51/1732531928 Skamania, Washington MIN #: 1000522-1401688325- SIS #: 1-888-679-6377

WHEREAS GEORGE C. REINMILLER TRUSTEE, INC. is the present Trustee of record under the following described Deed of Trust:

Trustor: GARRETT PJONTEK AND AMELIE GAGNE-PJONTEK HUSBAND AND WIFE

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

AMERICAN MORTGAGE COMPANY, ITS SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC AS NOMINEE FOR

FRANKLIN AMERICAN MORTGAGE COMPANY, ITS SUCCESSORS AND ASSIGNS

Original Trustee: COLUMBIA GORGE TITLE, LLC

Dated: 07/02/2013 Recorded: 07/11/2013 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

2013001478 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 770 NW ANGEL HEIGHT RD, 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 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 GEORGE C. REINMILLER TRUSTEE, INC. as Trustee

Multnomah

On __07/16/2014

George C. Reinmiller , President

STATE OF ____Oregon____

On <u>07/16/2014</u>, before me, <u>Annegeline A Manalang</u>, a Notary Public in and for <u>Multnomah</u> in the State of <u>Oregon</u>, personally appeared

George C. Reinmiller, 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,

COUNTY OF

Notary Expires: / /

(This area for notarial seal)

