AFN #2014001504 Recorded 09/04/2014 at 03:48 PM DocType: RECON Filed by: FIRST AMERICAN CORELOGIC INC Page: 1 of 1 Auditor Timothy O. Todd Skamania County, WA

When recorded return to:

CoreLogic 450 E Boundary St. Chapin, SC 29036

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**Deed of Reconveyance** 

M&T BANK #:0014132625 "STUMP" Lender ID:418/0211383333 Skamania, Washington MIN #: 100050300010827930 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: TROY AMAN STUMP AND NICOLE ANN STUMP, HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ITS SUCCESSORS AND ASSIGNS Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE

FOR M&T BANK ITS SUCCESSORS AND ASSIGNS

Original Trustee: CHICAGO TITLE INSURANCE COMPANY

Dated: 09/13/2011 Recorded: 09/20/2011 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

2011179072 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 91 CARSON DEPOT ROAD, 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 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

JANA POPE , Authorized Signatory

STATE OF South Carolina

COUNTY OF LEX 19+01

on the state of South Carolina, personally appeared JANA POPE, 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,

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Notary Public State of

JAMES B. KRIMM
Notary Public
State of South Carolina
My Commission Expires 12/1/2021

(This area for notarial seal)