AFN #2017001866 Recorded Sep 05, 2017 10:08 AM DocType: RECON Filed by: Lien Release Department Wells Fargo Bank NA Page: 1 of 1 File Fee: \$73.00 Auditor Robert J. Waymire Skamania County, WA

When Recorded Return To:

LIEN RELEASE DEPT WELLS FARGO BANK, N.A. MAC X9901-L1R P.O. BOX 1629 MINNEAPOLIS, MN 55440-9790

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Deed of Reconveyance

WF HOME EQUITY #:65122042461998 "CARTY" 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: GENE E MCCARTY AND FRANCES I MCCARTY

Beneficiary: WELLS FARGO BANK, N.A. Original Beneficiary: WELLS FARGO BANK, N.A.

Original Trustee: WELLS FARGO FINANCIAL NATIONAL BANK

Dated: 11/17/2007 Recorded: 12/10/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

2007168446 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 641 MATHEWS RD, 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 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 WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee On August 23rd, 2017

MICHAEL HERRERA-MARKWALD, TITLE OFFICER

STATE OF Minnesota COUNTY OF Hennepin

On August 23rd, 2017, before me, JOSHUA JOHN LUNDHOLM, a Notary Public in and for Hennepin in the State of Minnesota, personally appeared MICHAEL HERRERA-MARKWALD, TITLE OFFICER, WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION 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,

JOSHUA JOHN JUNDHOLM Notary Expires: 01/31/2019 JOSHUA JOHN LUNDHOLM NOTARY PUBLIC - MINNESOTA MY COMMISSION EXPIRES 01/31/2019

(This area for notarial seal)