2018 03:21 PM DocType: RECON Filed by: AFN #2018002005 Recorded Oct 03, Simplifile Page: 1 of 1 File Fee: \$99.00 Auditor Robert J. Waymire Skamania County, WA

When Recorded Return To:

Release Department LOANCARE, LLC P.O. BOX 8068 Virginia Beach, VA 23450-4968

W523763TE

Deed of Reconveyance

LOANCARE, LLC #:0016070138 "FOSTER" Lender ID:4CA/4011375566 Skamania, Washington MIN #: 100336300020646870 SIS #: 1-888-679-6377

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

Trustor: ROBERT FOSTER, A SINGLE MAN

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS DESIGNATED NOMINEE FOR AMERICAN FINANCIAL RESOURCES, INC, BENEFICIARY OF THE SECURITY

INSTRUMENT, ITS SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR AMERICAN FINANCIAL RESOURCES, INC, ITS SUCCESSORS AND ASSIGNS Original Trustee: COLUMBIA GORGE TITLE

Dated: 09/29/2015 Recorded: 10/06/2015 in Book/Reel/Liber; N/A Page/Folio: N/A as Instrument No.: 2015002055 In the Records of the County Recorder of Skamania, State of Washington.

Property Address: 82 BROOKS 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 TRUSTEE SERVICES, INC. as Trustee

On September 18th, 2018

JACOB A HAMM, ASSISTANT SECRETARY

STATE OF Washington COUNTY OF Kitsap

On September 18th, 2018, before me, MATTHEW J. ORMEROD, a Notary Public in and for Kitsap in the State of Washington, personally appeared JACOB A. HAMM, 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,

MATTHEW J. ORMEROD

Notary Expires: 02/14/2022 #170767

Notary Public State of Washington Matthew J Ormerod Commission Expires 02/14/2022

(This area for notarial seal)