Skamania County, WA Total: \$103.50 Pgs=1 RECON

2020-003004 11/02/2020 11:27 AM

Request of: WELLS FARGO BANK, N.A.

eRecorded by: CSC Ingeo

When Recorded Mail To:

F0013-012 AU 35101 LIEN RELEASE DEPT WELLS FARGO BANK, N.A. P.O. BOX 14469 DES MOINES, IA 50306-9655

Loan #: 65124436381998

DEED OF RECONVEYANCE

Recording Requested by WELLS FARGO BANK, N.A. LAMIN BAFODAY BARROW 2701 WELLS FARGO WAY MAC N9408-04L MINNEAPOLIS, MN 55467

Original Trustor: GUY L CASTONGUAY AND CYNTHIA K CASTONGUAY

Original Trustee: WELLS FARGO FINANCIAL NATIONAL BANK

Original Beneficiary: WELLS FARGO BANK, N.A.

Dated: 03/29/2008 Recorded: 04/25/2008, Auditor's / Instrument #: 2008169706 Book / Reel: N/A Page: N/A

Amount of Note: \$ 33100.00

Filed for record in Skamania County, State of WA

WHEREAS WELLS FARGO NATIONAL BANK WEST fka WELLS FARGO FINANCIAL NATIONAL BANK is the present Trustee of record under the above described Deed of Trust:

And whereas the above said Deed of Trust has been paid in full;

Now therefore, the present Trustee having received from the present beneficiary of the beneficial interest 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.

Date of Document: 11/02/2020

WELLS FARGO NATIONAL BANK WEST fka WELLS FARGO FINANCIAL NATIONAL BANK

LAMIN BAFODAY BARROW, TITLE OFFICER

STATE OF MN

COUNTY OF Hennepin \} s.s.

On 11/02/2020, before me, TERRI LYNN WESTGARD, a Notary Public, personally appeared LAMIN BAFODAY BARROW as TITLE OFFICER of WELLS FARGO NATIONAL BANK WEST fka WELLS FARGO FINANCIAL NATIONAL BANK, 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 Public: TERRI LYNN WESTGARD

My Commission Expires: 01/31/2025



Version: 4dfaaac5