

Skamania County, WA  
Total: \$304.50 Pgs=2  
RECON  
Request of: FIRST AMERICAN MORTGAGE SOLUTIONS  
eRecorded by: Simplifile

**2025-001938**

12/02/2025 02:31 PM

WHEN RECORDED MAIL TO:  
**FIRST AMERICAN MORTGAGE SOLUTIONS**  
**1795 INTERNATIONAL WAY**  
**IDAHO FALLS, ID 83402**  
**PH. 208-528-9895**

## DEED OF RECONVEYANCE

**WASHINGTON**

COUNTY OF SKAMANIA

LOAN NO.: 0000008308038059



PARCEL NO. 03073514080000

LEGAL DESCRIPTION: **LOTS 2-3, IMAN ROCK CREEK TRACTS Bk A, Pg. 118 Of PLATS**

THE UNDERSIGNED, **FIRST AMERICAN TITLE INSURANCE COMPANY**, located at **1 FIRST AMERICAN WAY, SANTA ANA, CA 92707**, the Trustee, under that certain Deed of Trust dated **JUNE 09, 2007**, executed by **PENNY EDLUND, UNMARRIED**, Trustor, to **FIRST AMERICAN TITLE INSURANCE COMPANY**, Original Trustee, for the benefit of **KEYBANK NATIONAL ASSOCIATION**, Original Beneficiary, and recorded on **JUNE 25, 2007** as Auditor's File No. **2007166638**, in the Records of the County Auditor's Office for **SKAMANIA County, State of WASHINGTON**.

PROPERTY ADDRESS: **1050 NW STILL COVE LANE, STEVENSON, WA 98648**

WHEREAS, the Undersigned received from **KEYBANK NATIONAL ASSOCIATION**, the Beneficiary of said Deed of Trust, a written request to reconvey, reciting that the obligation secured by said Deed of Trust has been fully paid and performed, does hereby grant, bargain, and convey, without any covenant or warranty, express or implied to the person or persons legally entitled thereto, all of the estate held by the Undersigned in and to said described premises by virtue of said Deed of Trust.

IN WITNESS WHEREOF, the undersigned has caused this Instrument to be executed on **DECEMBER 02, 2025**.  
**FIRST AMERICAN TITLE INSURANCE COMPANY**

**TRACY ALBERTSON, VICE PRESIDENT**

POD: 20251112

KB8121723IM - LR - WA



STATE OF **IDAHO**

COUNTY OF **BONNEVILLE** ) ss.

On **DECEMBER 02, 2025**, before me, **KATIE OLSON**, personally appeared **TRACY ALBERTSON** known to me to be the **VICE PRESIDENT** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.

*Katie Olson*

**KATIE OLSON (COMMISSION EXP. 02/26/2027)**  
NOTARY PUBLIC



This document contains electronic signatures.