WHEN RECORDED RETURN TO	ECORDED RETURN TO		200210240005	
Name PEOPLES BANK		Skagit County Audito 10/24/2002 Page 1 of 1	r 8:41AM	
Address P.O. BOX 233				
City, State, Zip LYNDEN WA 98264				
Land Title Company				
FILED FOR RECORD AT REQUEST OF				
LAND TITLE COMPANY Full Re	conveyance	P-102844-S		
The undersigned as trustee under that certain ODILON G FLORES, JR, separ	Deed of Trust dated	September 25 2002	ŕ	
PEOPLES BANK				
beneficiary, recorded on 9-25-2002 , a of Skagit County, Washing of Trust a written request to reconvey, reciting that fully satisfied, does hereby reconvey, without warratitle and interest now held by said trustee in and to Skagit County, Washing	ton, having received at the obligations sec nty, <b>to the person</b> to the property descri	from the beneficiary under said cured by the Deed of Trust have (s) entitled thereto all of the	Deed been right,	
Lot 5, "PLAT OF CEDARDOWNS Volume 15 of Plats, pages County, Washigton.  October 23 2002				
Dated October 23 2002	By Pair	E COMPANY OF SKAGIT COUNTY (Trustee) (Trustee) (MI) (MI) (MI) (MI) (MI) (MI) (MI) (MI	NTY 	
STATE OF WASHINGTON COUNTY OF	STATE OF WASHIN COUNTY OFSka			
On this day personally appeared before me	before me, the undersigne duly commissioned and s	day of October 2002d, a Notary Public in and for the State of Wash sworn, personally appeared	ington,	
to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that	the authorized signatory corporation that executed instrument to be the free a	ONHAAR to me know of AND TTTTT COMPANY of the foregoing instrument, and acknowledge and voluntary act and deed of said corporation in mentioned, and on oath stated that as said instrument.	, the ed said , for the	
GIVEN under this STATE OF WASHINGTON  NOTARY PUBLIC	Witness my hand and off written.	icial seal hereto affixed the day and year firs	t above	
My Commission Expires 9-8-2005 Notary Public in and for the State of Washington,		SHARON R ANTHONY Notary Public in and for the State of Washi	ngton,	

residing at .....

My appointment expires: .....

residing at MOUNT VERNON

My appointment expires: 9/6/2005....

Form No. LT-16 Full (4/99)