When Recorded Return To:

W S IRVING 8572 SOUTHRIDGE PLACE ANACORTES, WA 98221





Deed of Reconveyance

WFHM - CLIENT 591 #:9906219 "IRVING" Lender ID:H60001/7003734279 Skagit, Washington MERS #: 100017913111003987 VRU #: 1-888-679-6377

WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION is the present Trustee of record under the following described Deed of Trust:

Trustor: W SCOTT IRVING, A MARRIED MAN AS HIS SOLE AND SEPARATE PROPERTY

Beneficiary: Mortgage Electronic Registration Systems, Inc. ("Mers")
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")

Original Trustee: FIRST AMERICAN TITLE INSURANCE COMPANY

Dated: 11/15/2001 Recorded: 11/26/2001 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200111260007 In the Records of the County Recorder of Skagit, State of Washington. Property Address: 8572 SOUTHRIDGE PL, ANACORTES, WA 98221

AND WHEREAS, the above said Deed of Trust has been paid in full;

NOW THEREFORE, the present Trustee having received from the present owner 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.

By WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee On February 4th, 2003

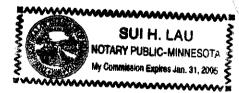
IRIS BERGERSON

STATE OF Minnesota **COUNTY OF Hennepin**

On February 4th, 2003, before me, Notary Public, a Notary Public in and for Hennepin County, in the State of Minnesota, personally appeared IRIS BERGERSON, TITLE OFFICER, 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 Notary Expires: / /



(This area for notarial seal)