

When Recorded Return To:

RUSSELL B SLEIPNESS  
10258 FRUITDALE ROAD  
SEDRO WOOLLEY, WA 98284



200302280102  
Skagit County Auditor

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**Deed of Reconveyance**

WFHM - CLIENT 591 #:9934481 "SLEIPNESS" Lender ID:H75001/9934481 Skagit, Washington  
MERS #: 100011399992475336 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: RUSSELL B SLEIPNESS AND SONJA J SLEIPNESS, HUSBAND AND WIFE  
Beneficiary: Wells Fargo Home Mortgage, Inc.  
Original Beneficiary: ARBORETUM MORTGAGE CORPORATION  
Original Trustee: ISLAND TITLE COMPANY  
Dated: 09/12/2001 Recorded: 09/21/2001 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200109210137 in the Records of the County Recorder of Skagit, State of Washington.  
Property Address: 10258 FRUITDALE ROAD, SEDRO WOOLLEY, WA 98284

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.

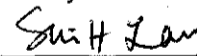
By WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee  
On February 19th, 2003

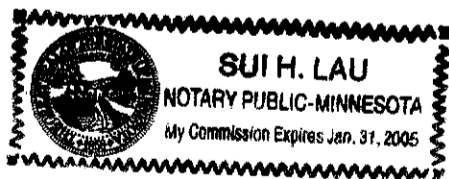
  
IRIS BERGERSON, TITLE OFFICER

STATE OF Minnesota  
COUNTY OF Hennepin

On February 19th, 2003, before me, THE UNDERSIGNED NOTARY, 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,

  
THE UNDERSIGNED NOTARY  
Notary Expires: / /



(This area for notarial seal)