

When Recorded Return To:

SHERRON BOWERS  
SUNTRUST MORTGAGE, INC.  
PAYOFF DEPT RVW 3013  
P. O. BOX 27406  
RICHMOND, VA 23286-9437



200409160040  
Skagit County Auditor

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**Deed of Reconveyance**

SUNTRUST MORTGAGE, INC. #:0141214031 "SIMPSON" Lender ID:F12/1686968385 Skagit, Washington  
WHEREAS RELEASE SYSTEMS, INC. is the present Trustee of record under the following described Deed of Trust:

Trustor: JERRY E SIMPSON, AN UNMARRIED PERSON  
Beneficiary: SUNTRUST MORTGAGE, INC.  
Original Beneficiary: SUNTRUST MORTGAGE, INC.  
Original Trustee: WASHINGTON ADMINISTRATIVE SERVICES, INC.  
Dated: 02/19/2003 Recorded: 03/03/2003 as Instrument No.: 200303030007 In the Records of the County  
Recorder of Skagit, State of Washington.  
Property Address: 60233 ST RT 20, MARBLEMOUNT, WA 98267

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 RELEASE SYSTEMS, INC. as Trustee  
On 8-9-2004

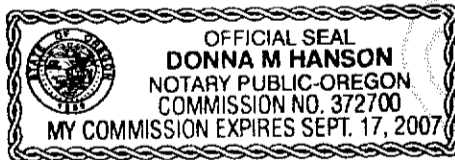
LANCE N. WESSELL, PRESIDENT

STATE OF OREGON  
COUNTY OF MULTNOMAH

On 8-9-2004, before me, DONNA M HANSON, a Notary Public in and for MULTNOMAH COUNTY in the State of OREGON, personally appeared LANCE N. WESSELL, PRESIDENT, 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,

Donna M Hanson  
Notary Expires: / /



(This area for notarial seal)