



200502140186
Skagit County Auditor

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REFERENCE #: 115012-P

ASSIGNEE: **ABN AMRO MORTGAGE GROUP, INC., A DELAWARE CORPORATION**

ASSIGNOR: **KIEL MORTGAGE,**

LAND TITLE OF SKAGIT COUNTY

ASSIGNMENT OF DEED OF TRUST

LOAN: **648033708**

For Value Received, the undersigned holder of a Deed of Trust (herein "Assignor") whose address is
203 MADISON AVE N, KENT WA 98032

does hereby grant, sell, assign. Transfer and convey, unto **ABN AMRO MORTGAGE GROUP, INC.**

existing under the laws of **THE STATE OF DELAWARE**
whose address is **2600 W. BIG BEAVER ROAD, TROY, MI 48084**

, a corporation organized and
(herein "Assignee"),

all beneficial interest under a certain Deed of Trust, dated **FEBRUARY 8, 2005** made and
executed by **JARED N. TIFFANY, A MARRIED MAN**

to **KIEL MORTGAGE**

and given to secure payment of **\$15,000.00** which Deed of Trust is of record in Book, Volume, or
(Original Amount of Principal)

Liber No. _____, at page _____ (or as No. **200502140185**)
of the _____ Records of **SKAGIT** County,
State of **WASHINGTON**, together with the note(s) and obligations therein described, the money
due and to become due thereon with interest, and all rights accrued or to accrue under such Deed of Trust.

TO HAVE AND TO HOLD, the same unto Assignee, its successor and assigns, forever, subject only to
the terms and conditions of the above-described Deed of Trust.

IN WITNESS WHEREOF, the undersigned Assignor has executed this Assignment of Deed of Trust on
KIEL MORTGAGE,

By: *Laura J. Kiel*
Attest _____ (Signature)

State of Washington
County of *King*

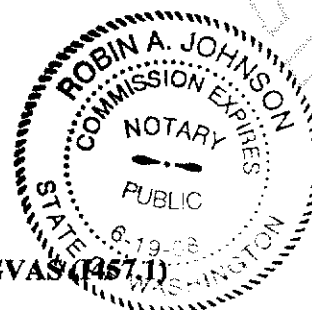
I certify that I know or have satisfactory evidence that *Laura J. Kiel*
is the person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath
stated that he/she was authorized to execute the instrument and acknowledged it as the *president*
of *Kiel mortgage, Inc.*

to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: *2-9-05*
Robin A. Johnson (Signature)

Notary (Title)

My appointment expires *6-19-08*



WAGVAS (9571)

WAGVAS 901