WHEN RECORDED RETURN TO:

Name: RICHARD J & ROSALIND GLEIN
Address: 5301 STERLING DR
City, State, Zip: ANACORTES WA 98221-3037

200911020028
Skagit County Auditor
11/2/2009 Page 1 of 1 9:41AM

Chicago Title Company - Island Division

#1285 $62

FULL RECONVEYANCE

The undersigned as trustee under that certain Deed of Trust, dated **April 13, 2007**, in which **RICAHRD J. GLEIN, as his separate estate; and ROSALIND GLEIN, who acquired title as Rosalind Bell, as her separate estate**, as grantor, **WHIDBEY ISLAND BANK**, as beneficiary, recorded **April 18, 2007**, as Auditor's File No. **200704180184,** records of **SKAGIT** County, Washington, having received from the beneficiary under said Deed of Trust a written request to reconvey, reciting that the obligations secured by the Deed of Trust has been fully satisfied, does hereby reconvey, without warranty, to the persons entitled thereto all of the right, title and interest now held by said trustee in and to the property described in said Deed of Trust, situated in **SKAGIT** County, Washington, as follows:

AS PER DEED OF TRUST

DATED: **October 29, 2009**

CHICAGO TITLE INSURANCE COMPANY

DENNIS FILAN, Authorized Signatory

STATE OF WASHINGTON)
) ss:
COUNTY OF ISLAND)

On **October 29, 2009**, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared **Dennis Filan** to me known to be the **Authorized Signatory** of the corporation that executed the foregoing instrument, and acknowledged the said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that **he is** authorized to execute the said instrument.

Witness my and official seal hereto affixed the day and year first above written

C. B. Grovdahl, Notary Public in and for the
State of Washington residing at Oak Harbor
My commission expires: **8/1/2013**

C. B. GROVDAHL
NOTARY PUBLIC
COMMISSION EXPIRES AUGUST 1, 2013
STATE OF WASHINGTON

UNOFFICIAL DOCUMENT