When Recorded Return To:

LIEN RELEASE DEPT. WELLS FARGO HOME MORTGAGE MAC X9400-L1C 11200 W PARKLAND AVE MILWAUKEE, WI 53224

Skagit County Auditor 1 of

4/23/2010 Page

1 8:57AM

Deed of Reconveyance WFHM - CLIENT 685 #:0492775 "OSBORNE" Lender ID:727177/825573831 Skagit, Washington WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION is the present Trustee of record under the following described Deed of Trust:

Trustor: ROBERT R OSBORNE AND CRYSTAL D OSBORNE, HUSBAND AND WIFE Beneficiary: Wells Fargo Bank, N.A., successor by merger to Wells Fargo Home Mortgage, Inc. Original Beneficiary: GOLF SAVINGS BANK Original Trustee: FIRST AMERICAN TITLE COMPANY Dated: 04/12/2002 Recorded: 04/22/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200204220146 In the Records of the County Recorder of Skagit, State of Washington. Property Address: 406 CABE LANE, 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 April 19th, 2010

KAREN LAZEWSKI, TITLE OFFICER

STATE OF Wisconsin **COUNTY OF Milwaukee** 

On April 19th, 2010, before me, SYLVIA KOHUT, a Notary Public in and for Milwaukee in the State of Wisconsin, personally appeared KAREN LAZEWSKI, 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,

SYLVIA KOHUT Notary Expires: 07/29/2012

Sylvia Kohut Notary Public State of Wisconsin

(This area for notarial seal)

\*LAA\*LAAWFMC\*04/19/2010 05:21:48 AM\* WFMC01WFMW000000000000000000784410\* WASKAGI\* 0492775 WASTATE\_TRUST\_REL \*\*LAAWFMC\*