

When Recorded Return To:

Release Department
LOANCARE, A DIVISION OF FNF SERVICING, INC
PO Box 8068
Virginia Beach, VA 23450



201208240056
Skagit County Auditor

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Deed of Reconveyance

LOANCARE, A DIVISION OF FNF SERVICING, INC #5958228 "BOWMAN" Lender ID:646/0207739115 Skagit, Washington
MERS #: 100073000848348603 SIS #: 1-888-679-6377

WHEREAS TRUSTEE SERVICES, INC. is the present Trustee of record under the following described Deed of Trust:

Trustor: RAY ALLEN BOWMAN AND BONNIE J BOWMAN, HUSBAND AND WIFE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE SOLELY FOR FREEDOM MORTGAGE CORPORATION
Original Beneficiary: FREEDOM MORTGAGE CORPORATION
Original Trustee: STEWART TITLE
Dated: 12/09/2011 Recorded: 12/20/2011 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 201112200095 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 4306 TYLER WAY, ANACORTES, WA 98221

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 TRUSTEE SERVICES, INC. as Trustee
On August 16th, 2012

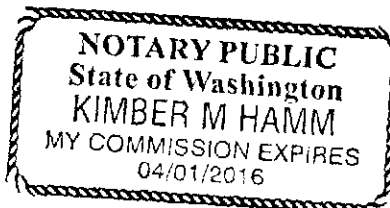
TAMMIE L ORMEROD, ASSISTANT SECRETARY

STATE OF Washington
COUNTY OF Kitsap

On August 16th, 2012, before me, KIMBER M. HAMM, a Notary Public in and for Kitsap in the State of Washington, personally appeared TAMMIE L ORMEROD, ASSISTANT SECRETARY, 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,

KIMBER M. HAMM
Notary Expires: 04/01/2016



(This area for notarial seal)