



201209100043

Skagit County Auditor

9/10/2012 Page 1 of 1 8:57AM

And When Recorded Mail To:

**CoreLogic**  
450 E. Boundary St.  
Chapin, SC 29036

Space above for Recorder's use

**FULL RECONVEYANCE**

MERS MIN#: 100052550244354139 PHONE#: (888) 679-6377

Customer#: 1 Service#: 119794RL1 +

Loan#: 9000652500 Case #: 19369833

THE UNDERSIGNED, as trustee under that certain deed of trust described below, conveying real property situated in said county and more fully described in said Deed Of Trust, having received from the beneficiary under said deed of trust a written request to reconvey, reciting that the obligation secured by said deed of trust has been fully paid and performed, hereby does grant, bargain, sell, and convey, but without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned in and to said described premises by virtue of said deed of trust.

Original Grantor: **ROBERT M. CONRAD, AND MARGO E. CONRAD, HUSBAND AND WIFE**

Original Grantee: **WESTWOOD MORTGAGE, INC.**

Current Beneficiary: **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., ACTING SOLELY AS NOMINEE FOR WESTWOOD MORTGAGE, INC., ITS SUCCESSORS AND ASSIGNS**

Deed Of Trust Dated: **FEBRUARY 13, 2009**

Recorded on: **FEBRUARY 23, 2009** as Instrument No. **200902230109** in Book No. --- at Page No. ---

Property Address: **577 KLAMATH DR, LACONNER, WA 98257-0000** County of **SKAGIT**, State Of **WASHINGTON**.

IN WITNESS WHEREOF, the undersigned trustee has executed this instrument, if the undersigned is a corporation, it has caused its corporate name to be signed hereunto by its officer duly authorized thereunto by order of its Board of Directors. Dated: 8/29/12

**FIRST AMERICAN TITLE INSURANCE COMPANY**

By:   
\_\_\_\_\_  
**Jana Pope** Assistant Secretary

State of SOUTH CAROLINA }  
County of LEXINGTON } ss.

On 8-29-12, before me, **Kerry Franklin**, a Notary Public, personally appeared **Jana Pope**, who 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(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of **SOUTH CAROLINA** that the foregoing paragraph is true and correct.  
Witness my hand and official seal.

(Notary Name): **Kerry Franklin**

**KERRY FRANKLIN**  
Notary Public  
State of South Carolina  
My Commission Expires 05/13/2019

Recording Requested By:  
**EVERBANK**