When Recorded Return To:

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



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1 9:02AM



Deed of Reconveyance
WFHM - CLIENT 936 #:0325095032 "RUTZ" Lender ID:780026/673982521 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: STEVEN W RUTZ AND JANET L RUTZ, HUSBAND AND WIFE

Beneficiary: Wells Fargo Bank, N.A.
Original Beneficiary: WELLS FARGO BANK, N.A.
Original Trustee: NORTHWEST TRUSTEE SERVICES LLC

Dated: 06/27/2011 Recorded: 06/30/2011 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 201106300060 In the Records of the County Recorder of Skajt, State of Washington.

Property Address: 1701 10TH ST, 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 WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee On September 21st, 2012

SVEPLANA GUZIKOVA, TITLE OFFICER

STATE OF Wisconsin **COUNTY OF Milwaukee**

On September 21st, 2012, before me, VINCENZA DOYNE, a Notary Public in and for Milwaukee in the State of Wisconsin, personally appeared SVETLANA GUZIKOVA, 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 linear health of which the person(s) 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,

VINCENZA DOYNE

Notary Expires: 05/22/2016

VINCENZA DOYNE NOTARY PUBLIC STATE OF WISCONSIN

(This area for notarial seal)