When Recorded Return To:

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



**Deed of Reconveyance** 

LOANCARE, A DIVISION OF FIRE SERVICING, INC #:7182645 "RUSSELL JR" Lender ID:646/0208600115 Skagit,

MERS #: 100073000853406932 SIS #: 1-888-679-6377

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

Trustor: LOUIS J RUSSELL JR AND PATTY RUSSELL, HUSBAND AND WIFE Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE SOLELY

FOR FREEDOM MORTGAGE CORPORATION

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE

SOLELY FOR FREEDOM MORTGAGE CORPORATION Original Trustee: CHICAGO TITLE INSURANCE COMPANY

Dated: 05/24/2012 Recorded: 06/05/2012 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

201206050066 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 505 S GARDNER RD, BURLINGTON, WA 98233

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 December 5th, 2012

TAMMIE L ORMEROD, ASSISTANT SECRETARY

STATE OF Washington COUNTY OF Kitsap

On December 5th, 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

NOTARY PUBLIC State of Washington KIMBER M HAMM MY COMMISSION EXPIRES 04/01/2016

(This area for notarial seal)