

When Recorded Return To:

LIEN RELEASE DEPT  
WELLS FARGO BANK, N.A.  
2324 OVERLAND AVE  
MAC# B6955-014  
BILLINGS, MT 59102-6401



Skagit County Auditor \$72.00  
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**Deed of Reconveyance**

WF HOME EQUITY #:65093022171998 "WILLOCK" Skagit, Washington  
WHEREAS WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION f/k/a  
WELLS FARGO FINANCIAL NATIONAL BANK is the present Trustee of record under the following described  
Deed of Trust:

Trustor: GEORGE WILLOCK AND RENEE WILLOCK  
Beneficiary: WELLS FARGO BANK, N.A.  
Original Beneficiary: WELLS FARGO BANK, N.A.  
Original Trustee: WELLS FARGO FINANCIAL NATIONAL BANK  
Dated: 07/01/2009 Recorded: 07/10/2009 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:  
200907100114 In the Records of the County Recorder of Skagit, State of Washington.  
Property Address: 18510 CASCADE VIEW DRIVE, MOUNT VERNON, WA 98274-0000

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 f/k/a WELLS  
FARGO FINANCIAL NATIONAL BANK as Trustee  
On April 12th, 2013

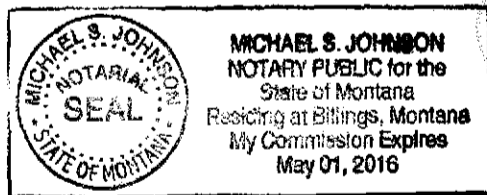
TARI ERFLE, TITLE OFFICER

STATE OF Montana  
COUNTY OF Yellowstone

On April 12th, 2013, before me, MICHAEL S JOHNSON, a Notary Public, personally appeared TARI ERFLE ,  
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,

MICHAEL S JOHNSON  
Notary Expires: 05/01/2016



(This area for notarial seal)