When Recorded Return To:



Skagit County Auditor 5/6/2013 Page

1 of

\$72.00 1 10:31AM

When recorded return to: CoreLogic 24865821 450 E Boundary St. Chapin, SC 29036

AFFIDAVIT AND INDEMNITY

M&T BANK #:0051644573 "KALKOSKE" Lender ID:P71/0501655425 Skagit, Washington MERS #: 100133700029545244 SIS #: 1-888-679-6377

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., the present Beneficiary under that certain Note Dated: 02/12/2008 Recorded: 02/21/2008 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200802210080 in Skagit in the State of Washington does hereby swear and depose that either said Note or said Deed of Trust or both are lost, damaged, or electronic image used.

Said Deed of Trust was executed by MICHAEL J KALKOSKE AND PATRICIA R KALKOSKE, HUSBAND AND WIFE as Grantor, with LS TITLE OF WASHINGTON as Trustee, and MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE FOR COUNTRYWIDE BANK, FSB as Beneficiary.

Property Address: 50275 STATE ROUTE 20, CONCRETE, WA 98237-9493

In consideration of issuance by FIRST AMERICAN TITLE INSURANCE COMPANY as Trustee of its Reconveyance of said Deed of Trust without the surrender to it of the aforementioned Note or of the Deed of Trust securing said Note for cancellation and Retention, Affiants hereby agree to hold said Trustee free and clear of all liability and responsibility of any loss, damage and expense that may arise or that said Trustee may suffer by reason of the issuance of such reconveyance without having possession of the original Note or the original Deed of Trust

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.

On April 11th, 2013.

Tiffany A. Kisloski, Assistant Secretary

STATE OF New York COUNTY OF Erie

On the 11th day of April in the year 2013 before me, the undersigned Notary Public in and for said State, personally appeared Tiffany A. Kisloski, Assistant Secretary, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(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 capacity(ies), and that by his/her/their signature(s) on the instrument the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

WITNESS my hand and official seal,

TASHIA L CAPERS
Notary Expires: 05/21/2016
Qualified in Erie County

TASHIA L. CAPERS
Lic. #01CA6262155
Notary Public-State of New York
Qualified in Erie
My Commission Expires 05/21/2016

(This area for notarial seal)