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Skagit County Auditor 4/27/2015 Page

\$72.00 8:45AM

AFF(DAV(T AND INDEMNITY M&T BANK #:0051909414, REULE: Lender ID:Q15/0103601615 Skagit, Washington MIN #: 100045200000454885, SIS #: 1-888-679-6377

When recorded return to:

CoreLogic 32Le 43524 450 E Boundary St.

Chapin, SC 29036

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ITS SUCCESSORS AND ASSIGNS, the present Beneficiary under that certain Note Dated: 12/10/2004 Recorded: 12/20/2004 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200412200165 in Skagit in the State of Washington does hereby swear and depose that either said Note of said Deed of Trust or both are lost, damaged, or electronic image used.

Said Deed of Trust was executed by TIMOTHY C REULE AND VALENIE A REULE, HUSBAND AND WIFE as Grantor, with LAND TITLE COMPANY OF SKAGIT COUNTY as Trustee, and MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE FOR EAGLE HOME MORTGAGE, INC. ITS SUCCESSORS AND ASSIGNS as Benefician.

Property Address: 10617 VISTA VIEW DRIVE, SEDRO WOOLLEY, WA 98284

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., ITS SUCCESSORS AND ASSIGNS On April 6th, 2015

Bν Tiffany A. Kisloski, Assistant Secretary

STATE OF New York COUNTY OF Frie

On the 6th day of April in the year 2015 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(les), 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,

1

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

TASHIA L. CAPERS Notary Public-State of New York Qualified In Erie My Commission Expires 05/21/2016

(This area for notarial seal)

*PJ1*PJ1MATB*04/06/2015 10:13:18 AM* MATB01MATB0000000000000000886668* WASKAGI* 0051909414 WASTATE_TRUST_IND *WNS*WNSMATB*