

When recorded return to:

CoreLogic
450 E Boundary St.
Chapin, SC 29036



201506120064

Skagit County Auditor

6/12/2015 Page

1 of

\$72.00

1 11:36AM

33017639

Deed of Reconveyance

M&T BANK #:0052712569 "SELFRIDGE" Lender ID:Q08/0203606447 Skagit, Washington
MIN #: 100164301000142523 SIS #: 1-888-679-6377

WHEREAS FIRST AMERICAN TITLE INSURANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: LISA SELFRIDGE, AN UNMARRIED WOMAN
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ITS SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE FOR THE BANK OF THE PACIFIC, A WASHINGTON BANKING CORPORATION ITS SUCCESSORS AND ASSIGNS
Original Trustee: LAND TITLE COMPANY OF SKAGIT COUNTY
Dated: 10/15/2009 Recorded: 10/16/2009 In Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200910160100 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 13934 AVON ALLEN ROAD, MOUNT VERNON, WA 98273

AND WHEREAS, the above said Deed of Trust has been paid in full;

NOW THEREFORE, the present Trustee having received from the present Beneficiary 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 FIRST AMERICAN TITLE INSURANCE COMPANY as Trustee
On 5-29-15

JANA POPE, Authorized Signatory

STATE OF South Carolina
COUNTY OF Lexington

On 5-29-15, before me, James B Krimm, a Notary Public in and for Lexington, in the State of South Carolina, personally appeared JANA POPE, Authorized Signatory, 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,

Notary Public, State of SC
Notary Expires 12/1/21

JAMES B KRIMM
Notary Public
State of South Carolina
My Commission Expires 12/1/2021

(This area for notarial seal)