When Recorded Return To:

Lien Release Department PHH Mortgage Corporation (PHHM) 1760 WEHRLE DRIVE WILLIAMSVILLE, NY 14221



Skagit County Auditor 1/21/2016 Page

1 of

\$73.00 1 12:05PM

Deed of Reconveyance

PHH Mortgage Corporation (PHHM) #:5040761347 "MALLARD" Lender ID:340 Skagit, Washington MIN #: 100065750407613478 SIS #: 1-888-679-6377

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

Trustor: RICHARD E MALLARD AND VICTORIA L MALLARD, HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR KEYBANK NATIONAL ASSOCIATION, 175 SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELEGTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR

KEYBANK NATIONAL ASSOCIATION, US SUCCESSORS AND ASSIGNS Original Trustee: FIRST AMERICAN TITLE

Dated: 11/07/2012 Recorded: 11/13/2012 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

201211130146 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 3508 WEST 5TH STREET, ANACORTES, WA 98221

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 Frustee

STATE OF UTAL

5011-10114 COUNTY OF

1/13/10 McMurtre Dana before me in the State of U 1911 personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose

a Notary Public in and for , personally appeared

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BANA L. Moh

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 Expires:

(This area for notarial seal)