

Skagit County Auditor 5/11/2017 Page

\$74.00 1 of

2 8:40AM

AFTER RECORDING MAIL TO:

UPF Washington Incorporated 12410 E Mirabeau Pkwy #100 Spokane Valley, WA 99216 Reference No. 496259

RE-RECORD TO CORRECT BORROWERS NAME

DOCUMENT TITLE:

Full Reconveyance

REFERENCE NUMBER(S) OF RELATED DOCUMENT:

201606240067 (Deed of Trust) 201704240015 (Full Reconveyance)

GRANTOR NAME:

UPF Washington Incorporated

GRANTEE NAME:

Craig Vincent Weakley Claudia Jean Peters

LEGAL:

Lot(s): 13 Highlands on Fidalgo Island

PARCEL NO.:

P127432/ 4951-000-013-0000



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\$73.00 1 8:40AM

RECORDING REQUESTED BY AND AFTER RECORDING MAIL TO:

UPF WASHINGTON INCORPORATED 12410 E MIRABEAU PKWY #100 SPOKANE VALLEY, WA 99216

Ref. No. 496259-S(P)

FULL RECONVEYANCE

The undersigned, as Trustee, under that certain Deed of Trust dated 6/20/2016 in which **Grety** Vincent Weakley and Claudia Jean Peters, as trustees of the Weakley-Peters Trust dated 5/14/2010, is/are Grantor (s), and Umpqua Bank, is Grantee, recorded on 6/24/2016, as Recording No. 201606240067, in Volume N/A, Page N/A, records of Skagit County, Washington, having received from the beneficiary under said Deed of Trust a written request to reconvey the real property described in said deed, does hereby reconvey, without warranty, to the person(s) entitled thereto all of the right, title and interest now held by said trustee in and to the real property described in said Deed of Trust, situated in Skagit County, Washington.

Legal: As described in said Deed of Trust

*Craig

DATED: 4/17/2017

UPF WASHINGTON, INCORPORATED, TRUSTEE

Loan # 8501283883

BY:

Brian Thompson, Vice President

STATE OF WASHINGTON
County of Spokane

*Craig

On 4/17/2017, before me, the undersigned Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared **Brian Thompson**, **Vice President**, 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(ies), and that by his/her/their signature(s) 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 in and for the State of Washington

Printed Name:

Shaunna L Gilbertson

My commission expires:

2/25/2021

Notary Public State of Washington Shaunna L. Gilbertson Commission Expires 02-25-2021