

When Recorded Return To:

LINDA JENNINGS
CITIZENS ONE HOME LOANS
P.O. BOX 6260
VAM 405
Glen Allen, VA 23058-9962



49971

Deed of Reconveyance

CITIZENS ONE HOME LOANS #*****1238 "SLOTEMAKER" Lender ID:FF5/1734549827 Skagit, Washington
MIN #: 100172010300236394 SIS #: 1-888-679-6377

WHEREAS RECONVEYANCE PROFESSIONALS, INC. is the present Trustee of record under the following described Deed of Trust:


Trustor: JASON E SLOTEMAKER, AS HIS SEPARATE PROPERTY
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), DESIGNATED NOMINEE FOR HERITAGE BANK, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS DESIGNATED NOMINEE FOR HERITAGE BANK, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS
Original Trustee: LAND TITLE COMPANY
Dated: 09/25/2014 Recorded: 09/30/2014 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 201409300106 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 1435 SOUTH 13TH STREET, MOUNT VERNON, WA 98274

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

NOW THEREFORE, the present Trustee having received from the present nominee for the 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 RECONVEYANCE PROFESSIONALS, INC. as Trustee
On JUNE 26, 2019



JAMES R. HOAGLAND, PRESIDENT

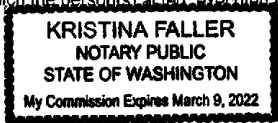
STATE OF SNOHOMISH
COUNTY OF WASHINGTON

On JUNE 20, 2019, before me, KRISTINA FALLER, a Notary Public in and for SNOHOMISH COUNTY in the State of WASHINGTON, personally appeared JAMES R. HOAGLAND, 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 Name: KRISTINA FALLER



Notary Expires: Notary Public in and for the State of WASHINGTON
Notary Expires: 03/09/2022

(This area for notarial seal)