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04/15/2020 10:37 AM Pages: 1 of 1 Fees: \$103.50 Skagit County Auditor

Loan Number: 6890918393

Prepared by: Donalda Green

Return Address

Truist Bank 7701 Airport Center Drive Greensboro, NC 27409

> Above Space for Recorder's User Only MERS MIN# 100172010300308706 MERS Phone Number: 1-888-679-6377 MERS Address: P.O. Box 2026, Flint, MI 48501-2026

## **FULL RECONVEYANCE**

WHEREAS, GEORGE C REINMILLER TRUSTEE, INC is the present Trustee of record under the following described Deed of Trust

Trustor: JOHN R BRINK JR and CHRISTIE J BRINK, Husband and Wife, 1216 E GILKEY RD, BURLINGTON, WA 98233-2434,

BURLING ION, WA 98233-2434,
Beneficiary: Mortgage Electronic Registration Systems, Inc., as designated nominee for beneficiary of the security instrument, HERITAGE BANK, its successors and assigns, whose address is P.O. Box 2026, Flint, MI 48501-2026
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC AS NOMINEE FOR HERITAGE BANK ITS SUCCESSORS AND ASSIGNS
Original Trustee: Chicago Title Company of Washington

Dated: September 22, 2017 Recorded: September 29, 2017 in Book/Reel/Liber: N/A Page/Folio N/A as Instrument No. 201709290050. In the Records of the County Recorder of Skagit County, State of Washington.

Property Address: 1216 E GILKEY RD, BURLINGTON, WA 98233

NOW THEREFORE, the present Trustee having received the payment 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.

_	04/13/						
GEOR	GE C REIN	MILLER TRU	ISTEE, II	NC as Trustee			
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						ty of the individual racy, or validity of	
STATE COUN		Oregon Multnomah	}				
REINM person( he/she/ signatu	ILLER TRI (s) whose i they exect ire(s) on th	USTEE, INC, name(s) is/are uted the same	who provesubscrite in his/the he perso	red to me on the ped to the within eir/her authorize	e basis of satis n instrument a ed capacity(ie:	_, a Notary Pub for GEORGE ( sfactory evidence nd acknowledge s), and that by he f of which the pe	ce to be the ed to me that nis/her/their
Notary	SS my har Public: Expiration	nd and official	seal.			OFFICIAL ST LOKADANA BI NOTARY PUBLIC COMMISSION N COMMISSION EXPIRES DI	OREGON 0, 969351