

WHEN RECORDED MAIL TO:
FIRST AMERICAN MORTGAGE SOLUTIONS
 1795 INTERNATIONAL WAY
 IDAHO FALLS, ID 83402
 PH. 208-528-9895

DEED OF RECONVEYANCE

WASHINGTON
 COUNTY OF SKAGIT
 LOAN NO.: 0137075420

RECORD 2NDPARCEL NO. **P69737**

LEGAL DESCRIPTION: LOT (S): 19 SPARR'S REPLAT IN TRACTS 13 AND 15 BURLINGTON ACREAGE PROPERTY

THE UNDERSIGNED, **FIRST AMERICAN TITLE INSURANCE COMPANY**, located at 1 **FIRST AMERICAN WAY, SANTA ANA, CA 92707**, as Trustee, Successor Trustee, or Substitute Trustee, under that certain Deed of Trust dated **OCTOBER 15, 2021**, executed by **ALBERTA L. CAMPBELL AND JOHN R. CAMPBELL, WIFE AND HUSBAND**, Trustor, to **FIRST AMERICAN TITLE INSURANCE COMPANY**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS DESIGNATED NOMINEE FOR **FREEDOM MORTGAGE CORPORATION**, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS, Original Beneficiary, and recorded on **NOVEMBER 03, 2021** as Auditor's File No. **202111030027**, in the Records of the County Auditor's Office for **SKAGIT County, State of WASHINGTON**.

PROPERTY ADDRESS: **20327 MAPLE ST, BURLINGTON, WA 98233**

WHEREAS, the Undersigned received from **FREEDOM MORTGAGE CORPORATION**, the Beneficiary of said Deed of Trust, a written request to reconvey, reciting that the obligation secured by said Deed of Trust has been fully paid and performed, does hereby grant, bargain, and convey, without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the Undersigned in and to said described premises by virtue of said Deed of Trust.

IN WITNESS WHEREOF, the undersigned has caused this Instrument to be executed on
DEC 16 2022

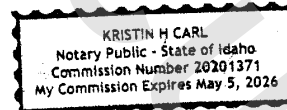
FIRST AMERICAN TITLE INSURANCE COMPANY

CAMILLE DU PAR, VICE PRESIDENT

STATE OF **IDAHO** COUNTY OF **BONNEVILLE**) ss.

On **DEC 16 2022**, before me, **KRISTIN H. CARL**, personally appeared **CAMILLE DU PAR** known to me to be the **VICE PRESIDENT** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.

KRISTIN H. CARL (COMMISSION EXP. 05/05/2026)
 NOTARY PUBLIC



POD: 20221207
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MIN: 100073001370754200
 MERS PHONE: 1-888-679-6377