

Assessor's/Tax ID No. 1418-34-304-010

Recording Requested By:  
WASHINGTON MUTUAL BANK FA

Douglas County - NV  
Werner Christen - Recorder  
Page: 1 Of 2 Fee: 15.00  
BK-0705 PG- 7665 RPTT: # 0

When Recorded Return To:

✓ WASHINGTON MUTUAL  
PO BOX 45179  
JACKSONVILLE, FL 32232-5179



**DEED OF RECONVEYANCE**

WASHINGTON MUTUAL - CLIENT 156 #:0623914413 "BUEHLER" Lender

ID:F46/886/1686762903 Douglas, Nevada PIF: 06/29/2005

WHEREAS CALIFORNIA RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: ROBERT J BUEHLER AND CAROLE K BUEHLER

Beneficiary: WASHINGTON MUTUAL BANK, FA

Original Beneficiary: WASHINGTON MUTUAL BANK FA, A FEDERAL ASSOCIATION

Original Trustee: CALIFORNIA RECONVEYANCE COMPANY

Dated: 03/07/2003

Recorded on: 03/14/2003

Doc/Inst. No.: 0569972 Book: in Book/Reel/Liber: N/A Page: Page/Folio: N/A

County of Douglas State of Nevada

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

NOW THEREFORE, the present Trustee having received from the present owner of the beneficial interest under said Deed of Trust and the obligations secured thereby a 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 in said Douglas County, State of Nevada, describing the land therein as more fully described in said Deed of Trust.

Property Address : 175 MASON CT, ZEPHYR COVE, NV 89448


By CALIFORNIA RECONVEYANCE COMPANY as Trustee  
On July 11th, 2005


  
\_\_\_\_\_  
M BAGGS, ASST VICE PRESIDENT

STATE OF Florida  
COUNTY OF Duval

On July 11th, 2005, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared M BAGGS, ASST VICE PRESIDENT, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

  
\_\_\_\_\_  
Notary Expires: / /

NOTARY PUBLIC  
  
STATE OF FLORIDA  
**Shannon Macklin**  
Commission # DD428678  
Expires May 11, 2009  
Bonded Troy Fain - Insurance, Inc. 800-385-7019

(This area for notarial seal)

\*BG\*BGWAMT\*07/11/2005 12:18:22 PM\* WAMU03WAMU000000000000002758254\* NVDOUGL\* 0623914413 NVDOUGL\_TRUST\_REL \*BG\*BGWAMT\*

