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DOC # 0650754
07/28/2005 02:49 PM Deputy: BC
OFFICIAL RECORD
Requested By:
WASHINGTON MUTUAL BANK

Assessor's/Tax ID No. 1220-22-210-121

Recording Requested By:
WASHINGTON MUTUAL BANK FA

When Recorded Return To:

Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 2 Fee: 15.00
BK-0705 PG-13448 RPT: 0.00

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



DEED OF RECONVEYANCE

WASHINGTON MUTUAL - CLIENT 156 #:0041320169 "HICKS JR" Lender
ID:F33/589/1678141638 Douglas, Nevada PIF: 07/07/2005

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

Trustor: JOSEPH F HICKS JR AND MARY K HICKS
Beneficiary: WASHINGTON MUTUAL BANK, FA
Original Beneficiary: WASHINGTON MUTUAL BANK, FA, A FEDERAL ASSOCIATION
Original Trustee: CALIFORNIA RECONVEYANCE COMPANY
Dated: 08/10/2001
Recorded on: 08/21/2001
Doc/Inst. No.: 0521124 Book: in Book/Reel/Liber: 0801 Page: Page/Folio: 5607
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 : 714 BOWLES LN, GARDNERVILLE, NV 89410

By CALIFORNIA RECONVEYANCE COMPANY as Trustee
On July 21st, 2005




M BAGGS, ASST VICE PRESIDENT

STATE OF Florida
COUNTY OF Duval

On July 21st, 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: / /

 **Shannon Macklin**
Commission # DD428678
Expires May 11, 2009
Bonded Troy Pain - Insurance, Inc. 800-385-7019

(This area for notarial seal)