

OFFICIAL RECORD

Requested By:

WASHINGTON MUTUAL BANK

Assessor's/Tax ID No. 1319-18-310-024

Recording Requested By:  
WASHINGTON MUTUAL BANK FA

Douglas County - NV  
Werner Christen - Recorder  
Page: 1 Of 2 Fee: 15.00  
BK-0905 PG- 4560 RPTT: 0.00

When Recorded Return To:

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



**DEED OF RECONVEYANCE**


WASHINGTON MUTUAL - CLIENT 156 #:0615005246 "HANSEN" Lender ID:F46/928/1687010332  
Douglas, Nevada PIF: 08/25/2005  
WHEREAS CALIFORNIA RECONVEYANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: MICHAEL A.HANSEN AND ELLEN POLLARD  
Beneficiary: WASHINGTON MUTUAL BANK, FA  
Original Beneficiary: WASHINGTON MUTUAL BANK, FA, A FEDERAL ASSOCIATION  
Original Trustee: CALIFORNIA RECONVEYANCE COMPANY  
Dated: 10/23/2002  
Recorded on: 11/04/2002  
Doc/Inst. No.: 0556811 Book: in Book/Reel/Liber: 1102 Page: Page/Folio: 01131  
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 : 377 ANDRIA DR, STATELINE, NV 89449

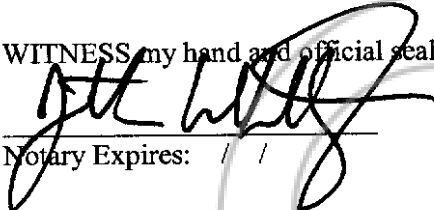
By CALIFORNIA RECONVEYANCE COMPANY as Trustee  
On September 2nd, 2005

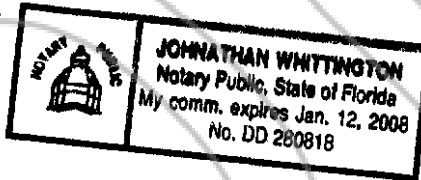
  
\_\_\_\_\_  
J TATE , LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida  
COUNTY OF Duval

On September 2nd, 2005, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared J TATE , LIEN RELEASE ASSISTANT SECRETARY, 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: / /



(This area for notarial seal)