

OFFICIAL RECORD

Requested By:

WASHINGTON MUTUAL BANK

Assessor's/Tax ID No. 1220-01-001-052

Recording Requested By:  
WASHINGTON MUTUAL BANK FA

When Recorded Return To:

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

Douglas County - NV  
Werner Christen - Recorder

Page: 1 Of 2 Fee: 15.00  
BK-0307 PG- 3700 RPTT: 0.00



**DEED OF RECONVEYANCE**

WASHINGTON MUTUAL - CLIENT 156 #:0667496640 "CHARTIER" Lender  
ID:R79/001/667496640 Douglas, Nevada PIF: 01/31/2007

THE UNDERSIGNED DOES HEREBY AFFIRM THAT THIS DOCUMENT SUBMITTED  
FOR RECORDING DOES NOT CONTAIN A SOCIAL SECURITY NUMBER.

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

Trustor: WALTER J CHARTIER AN UNMARRIED MAN  
Beneficiary: WASHINGTON MUTUAL BANK, FA  
Original Beneficiary: WASHINGTON MUTUAL BANK, FA  
Original Trustee: CALIFORNIA RECONVEYANCE COMPANY  
Dated: 02/10/2004  
Recorded on: 02/23/2004  
Doc/Inst. No.: 0605343 Book: in Book/Reel/Liber: 0204 Page: Page/Folio: 09266  
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 : 1871 FISH SPRINGS RD, GARDNERVILLE, NV 89410

DEED OF RECONVEYANCE Page 2 of 2

By CALIFORNIA RECONVEYANCE COMPANY as Trustee  
On February 5th, 2007

  
\_\_\_\_\_  
DAMIR PEKUSIC , LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida  
COUNTY OF Duval

On February 5th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared DAMIR PEKUSIC , 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: / /

NOTARY PUBLIC **Tammie R. McCauley**  
 Commission # DD474471  
Expires September 21, 2009  
STATE OF FLORIDA Bonded Troy Pain - Insurance Inc 800-365-7019

(This area for notarial seal)

\*SKK\*SKKWAMT\*02/05/2007 07:41:11 AM\* WAMU03WAMU000000000000004023357\*  
NVDOUGL\* 0667496640 NVDOUGL\_TRUST\_REL \* \_A\*\_A\_WAMT\*