

OFFICIAL RECORD

Requested By:

WASHINGTON MUTUAL BANK

Assessor's/Tax ID No. 1319-30-310-017

Recording Requested By:
WASHINGTON MUTUAL BANK FA

Douglas County - NV
Werner Christen - Recorder

Page: 1 Of 2 Fee: 15.00
BK-0707 PG-1508 RPTT: 0.00

When Recorded Return To:

WASHINGTON MUTUAL
PO BOX 45179
JACKSONVILLE, FL 32232-5179



DEED OF RECONVEYANCE

WASHINGTON MUTUAL - CLIENT 156 #:0689271120 "SLATON" Lender
ID:A01/017/0689271120 Douglas, Nevada PIF: 06/01/2007

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: STANLEY A SLATON AND ALICE SLATON CO-TRUSTEES OF THE SLATON
FAMILY INTER VIVOS TRUST DATED FEBRUARY 9 1995

Beneficiary: WASHINGTON MUTUAL BANK, FA

Original Beneficiary: WASHINGTON MUTUAL BANK, FA

Original Trustee: CALIFORNIA RECONVEYANCE COMPANY

Dated: 07/15/2005

Recorded on: 07/27/2005

Doc/Inst. No.: 0650635 Book: in Book/Reel/Liber: 0705 Page: Page/Folio: 12677

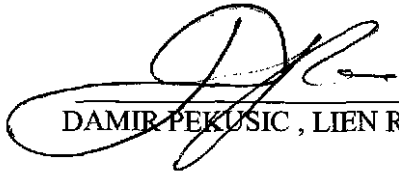
County of Douglas State of Nevada

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 : 1623 NEEDLE PEAK RD, STATELINE, NV 89449

*SKK*SKKWAMT*06/27/2007 10:00:11 AM* WAMU03WAMU000000000000004204412*
NVDOUGL* 0689271120 NVDOUGL_TRUST_REL * SH*SHWAMT*

By CALIFORNIA RECONVEYANCE COMPANY as Trustee
On June 27th, 2007




DAMIR PEKUSIC , LIEN RELEASE ASSISTANT SECRETARY

STATE OF Florida
COUNTY OF Duval

On June 27th, 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
Bonded Troy Pain Insurance, Inc. 800-568-7018
STATE OF FLORIDA

(This area for notarial seal)

*SKK*SKKWAMT*06/27/2007 10:00:11 AM* WAMU03WAMU000000000000004204412*
NVDOUGL* 0689271120 NVDOUGL_TRUST_REL * SH*SHWAMT*