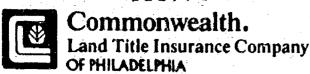
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FILED FOR RECORD AT REQUEST OF

Form No. 3169

My appointment expires

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THIS SPACE PROVIDED FOR RECORDER'S USE:

FILED FOR RECORD CK 1 H Y 70 Y CU - WYSH B CLARK COUNTY TITUE Aug 3 12 23 tri 'SI WHEN RECORDED RETURN TO CARY N. CLOON Name U.S. CREDITCORP Registered Address P.O. BOX 3347 Indexed, Dir Indirect City, State, Zip PORTLAND, OR 97208 Filmed-Mailed CCT MISC. **Full Reconveyance** The undersigned as trustee under that certain Deed of Trust, dated JUNE 20 19 86 in which REESE J. HOWELL AND BETTY S. HOWELL, HUSBAND AND WIFE is grantor and U.S. CREDITCORP INDUSTRIAL LOAN COMPANY, A WASHINGTON CORPORATION is beneficiary, 101372 recorded on JUNE 23 , 19.86 , as Auditor's File No. 8660 2300 , in Volume 101 of Mortgages, at page 665, records of XXXXXX Skamania County, Washington, having received from the beneficiary under said Deed of Trust a written request to reconvey, reciting that the obligations secured by the Deed of Trust has been fully satisfied, does hereby reconvey, without warranty, to the LOT 2 OF THE REESE J. HOWELL SHORT PLAT FILED UNDER AUDITOR'S FILE NO. 92115, IN BOOK 2 OF SHORT PLATS, PAGE 202, BEING A PORTION OF THE SOUTHEAST QUARTER OF SECTION 34, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN SKAMANIA COUNTY, WASHINGTON AKA: M.P. 0.76R, WANTLAND ROAD, WASHOUGAL, WA 98671 AUGUST CLARK COUNTY TITLE COMPANY (Trustee) obert a. Cano (Name - Title) ROBERT A. CANO, VICE PRESIDENT (Name - Title) STATE OF WASHINGTON STATE OF WASHINGTON COUNTY OF CLARK COUNTY OF. is the person(s) who appeared before me, and said person(s) acknowledged that the/she/they) signed this instrument, on path stated that (he/she/they) was (were) authorized to execute the instrument person(s) who appeared before me, and said person(s) and acknowledged it as the __ acknowledged that (he/she/they) signed this instrument and VICE PRESIDENT acknowledged it to be (his/her/their) free and voluntary act for CLARK COUNTY TITLE CO. the uses and purposes mentioned in the instrument. such party for the uses and purposes mentioned in the instrumen Signature ISEAL OR STAMP ISEAL OR STAMP **NOTARY** Title

6/25/92

My appointment expires