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BOOK 128 PAGE 771

TRANSAMERICA TITLE INSURANCE COMPANY

FILED FOR RECORD AT REQUEST OF

 FILED FOR RECORD
 BY SKAMANIA CO. TITLE

MAY 21 10 40 AM '92

GARY H. OLSON

THIS SPACE PROVIDED FOR RECORDER'S USE:

9200455

WHEN RECORDED RETURN TO

Name RIVERVIEW SAVINGS BANK

Address 700 NE 4th Avenue

City, State, Zip Camas, WA 98607

Registered

Indexed, dir

Indirect

Filed

Mailed

0101402952

DEED OF FULL RECONVEYANCE

The undersigned as Trustee or Successor Trustee under that certain Deed of Trust described as follows:

Dated : June 18, 1990

Recorded : June 20, 1990

Recording Number : 109483

Book : 119 Page : 423

County Of : Skamania

State Of : Washington

Grantor : GARY H. AMOS AND DEBRA D. AMOS, husband & wife

Trustee : Transamerica Title Insurance Company

Beneficiary : RIVERVIEW SAVINGS BANK

Legal Description :

A tract of land located in the Southwest quarter of the Southwest quarter of Section 21, Township 3 North, Range 8 East of the Willamette Meridian, described as follows:

Beginning at the Northwest corner of the South half of the Northwest quarter of the Southwest quarter of the Southwest quarter of the said Section 21; thence East along the North line of said subdivision 170 feet; thence South 290 feet; thence West 170 feet to intersection with the West line of the said Section 21; thence North 290 feet to the point of beginning.

EXCEPT the North 164 feet thereof.

ALSO KNOWN AS Lot 2 of the ROE SHORT PLAT.

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 have been fully satisfied, does hereby grant, bargain, sell and reconvey, unto the parties entitled thereto all right, title and interest which was heretofore acquired by said Trustee(s) under said Deed of Trust.

Date : May 12, 1992

TRANSAMERICA TITLE INSURANCE COMPANY

BY


 Assistant Secretary

 State of Washington
 County of Clark

I certify that I know or have satisfactory evidence that Kenneth M. Doane is the

(NAME OF PERSON)

person who appeared before me, and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she) was authorized to execute the instrument and acknowledged it as the Assistant Secretary

(TYPE OF AUTHORITY, E.G., OFFICER, TRUSTEE, ETC.)

of TRANSAMERICA TITLE INSURANCE COMPANY

to be the free and voluntary act of

(NAME OF PARTY ON BEHALF OF WHOM THE INSTRUMENT WAS EXECUTED)

such party for the uses and purposes mentioned in the instrument.

Dated: May 12, 1992

(SEAL OR STAMP)

 LINDA C. COMLEY
 NOTARY PUBLIC
 STATE OF WASHINGTON
 COMMISSION EXPIRES
 MAY 30, 1995

SIGNATURE

Notary Public

TITLE

My appointment expires

5-30-95