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Commonwealth.
Land Title Insurance Company
OF PHILADELPHIA

THIS SPACE PROVIDED FOR RECORDER'S USE:

BY CLARK COUNTY TITLE

MAY 8 2 19 PM '92

P. Lowry
AUDITOR

GARY M. OLSON

FILED FOR RECORD
SKAMANIA CO. WASH
BY CLARK COUNTY TITLE

JUL 17 9 38 AM '92

P. Lowry

GARY M. OLSON

FILED FOR RECORD AT REQUEST OF

Registered
Indexed, Dir
Indirect
Filed 5/15/92
Mailed

CCT Misc.

WHEN RECORDED RETURN TO

Name Washington Mutual Savings Bank
Attention: Loan Servicing Operations SA0307
Address P.O. Box 834
City, State, Zip Seattle, WA 98111

03-401-239238-9

Full Reconveyance

The undersigned as trustee under that certain Deed of Trust, dated March 7, 1984,
in which ^{Calvin} Clavin White and Mary H. White, husband and wife is grantor
and Vancouver Federal Savings & Loan Association is beneficiary,
recorded on March 13, 1984, as Auditor's File No. 97250, in Volume 60
of Mortgages, at page 135, records of ~~Clark~~ 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
person(s) entitled thereto all of the right, title and interest now held by said trustee in and to the property described
in said Deed of Trust, situated in ~~Clark~~ Skamania County, Washington, as follows:

See said Auditor's File No.

Registered
Indexed, Dir
Indirect
Filed 7/28/92
Mailed

Dated April 21, 1992

Clark County Title Company
(Trustee)

By Robert A. Cano
Robert A. Cano, (Name - Title) Vice President

By _____
(Name - Title)

STATE OF WASHINGTON

COUNTY OF _____ } "

I certify that I know or have satisfactory evidence that

_____ is the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in the instrument.

Dated _____

Signature _____

Title _____

(SEAL OR STAMP)

Form No. 3169

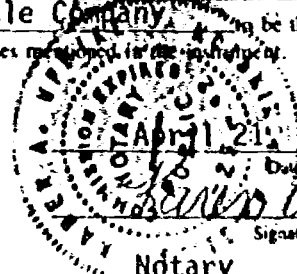
My appointment expires _____

STATE OF WASHINGTON

COUNTY OF Clark } "

I certify that I know or have satisfactory evidence that

Robert A. Cano is the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument, on oath stated that (he/she/they) was (were) authorized to execute the instrument and acknowledged it as the Vice President of Clark County Title Company, and that the same may be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.



Dated April 21, 1992

Signature Robert A. Updike

Notary

Title _____

(SEAL OR STAMP)

June 25, 1992

My appointment expires _____

3-8-29-1-1-1300, 4400