

114143

BOOK 130 PAGE 105

TRANSAMERICA TITLE INSURANCE COMPANY

FILED FOR RECORD AT REQUEST OF

 FILED FOR RECORD
 BY SKAMANIA CO. TITLE

THIS SPACE PROVIDED FOR RECORDER'S USE:

AUG 6 1 13 PM '92

GARY H. OLSON

WHEN RECORDED RETURN TO

Name Riverview Savings Bank
 Address P.O. Box 1068
Camas, WA 98607

Registered 8/1/92
 Indexed 8/1/92
 Indirect 8/1/92
 Filmed 8/1/92
 Mailed 8/1/92

0201400141

DEED OF FULL RECONVEYANCE

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

Dated : December 12, 1977 Recorded : December 15, 1977
 Recording Number : 85470 Book : 55 Page : 12
 County Of : Skamania
 State Of : Washington
 Grantor : LEONARD W. SELBY AND BILLIE JO SELBY, husband and wife
 Trustee : Transamerica Title Insurance Company
 Beneficiary : Riverview Savings Association
 Legal Description : Lot 12 of Skamania Highlands, as per plat recorded in Book "A" of Plats at Page 140, records of Skamania County, Washington.

Subject to easements and restrictions of record.

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 : July 10, 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

(NAME OF PERSON)

is the

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

of TRANSAMERICA TITLE INSURANCE COMPANY
 (TYPE OF AUTHORITY, E.G., OFFICER, TRUSTEE, ETC.)

such party for the uses and purposes mentioned in the instrument.
 (NAME OF PARTY ON BEHALF OF WHOM THE INSTRUMENT WAS EXECUTED)

Dated: July 10, 1992

SIGNATURE

Notary Public

TITLE

My appointment expires

8/1/92



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Date : July 10, 1992

TRANSAMERICA TITLE INSURANCE COMPANY

 BY Kenneth M. Doane
 Assistant Secretary

State of Washington

County of ClarkI certify that I know or have satisfactory evidence that KENNETH M. DOANE is theperson 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 Secretaryof 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: July 10, 1992

SIGNATURE

Notary Public

TITLE

My appointment expires 8/1/92