

90515

BOOK 57 PAGE 122

Return to: WP
Rainier Mortgage Company
P. O. Box 990
Seattle, WA 98111

ASSIGNMENT OF DEED OF TRUST

For Value Received, RAINIER MORTGAGE COMPANY hereby assigns and conveys to FEDERAL NATIONAL MORTGAGE ASSOCIATION, whose address is 3435 Wilshire Boulevard, Los Angeles, California, all rights, title and interest of RAINIER MORTGAGE COMPANY as Beneficiary under that certain Deed of Trust recorded in the office of the County Auditor of SKAMANIA County, of _____ Recording District, _____ Judicial District, State of WASHINGTON, under Auditor's File Number, on the date, in the Volume and Page of the Book of Mortgages, as shown below together with the Note secured thereby:

| Date of Instrument | GRANTOR/TRUSTOR | RECORDING INFORMATION | | | |
|--------------------|--|-----------------------|----------|---------|----------------------------|
| | | Amount | File No. | Date | Vol & Page Reel & Frame |
| 3-14-80 | JERMANN, ANN L., an unmarried woman | 60.550 | 90458 | 1-19-80 | 57 94-97 |
| Title No. | | | | | |
| SK 1861 | | | | | |

Whenever herein the word "Deed of Trust" is used, the same shall include "Mortgage," the word "Grantor" shall include "Mortgagor" and "Trustor" and the word "Beneficiary" shall include "Mortgagee," as the particular situation or context may require.

RAINTER MORTGAGE COMPANY

Dated: March 24, 1980

By: _____
Authorized Signature

By: Vice President

STATE OF WASHINGTON,
King County

On this 24th day of March, 1980, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Carole K. Claassen or P. A. Gilbert, known to me to be the Authorized Signature or Vice-President of the Corporation that executed the within Instrument, and known to me to be the person who executed the within Instrument on behalf of the Corporation therein named, and acknowledged to me that such Corporation executed the within Instrument pursuant to its by-laws.

WITNESS my hand and official seal

Notary Public in and for said County
and State

