RIVERVIEW SAVINGS BANK

Address

P.O. BOX 1068

City, State, Zip.

CAMAS, WA. 98607-0068

FILED FOR RECORD SKAMANIA CO. WASH

GARY H. OLSON

DEED OF FULL RECONVEYANCE

116443

PAGE 882

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

Dated

MAY 04, 1992

Recorded: MAY 06, 1992

Page:

516

Registered Indexed. U la brect Maded

County Of

SKAMANIA Washington

113455

State Of

STEPHEN J. SNEDEKER AND CHERYL I. BURNETT-SNEDEKER, HUSBAND AND WIFE

Book: 128

Grantor Trustee

RIVERVIEW SERVICES, INC.

Beneficiary

RIVERVIEW SAVINGS BANK

Legal Description

Recording Number

A TRACT OF LAND IN THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 3, TOWNSHIP 1 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

LOT 1, OF THE BURNETT SHORT PLAT NO. 3 RECORDED IN BOOK 3 OF SHORT PLATS PAGE 157, SKAMANIA COUNTY RECORDS.

having received from the Beneficiary under said Deed of Trust, a written request to reconvey, reciting that the obligations sequred by the Beneficiary under said Deed of Trust have been fully satisfied, does hereby grant, bargain, sell and reconvey, unto the parties entitled there wall right, title and interest which was heretofore acquired by said Trustee(s) under said Deed RRORATE

RIVERVIEW

PHYLLIS PRETBICK - SECRETARY

State Of Washington

County Of ___CLARK

PHYLLIS KREIBICH

I certify that I know or have satisfactory evidence that (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 action of SECRETARY

OF ALVERY OF AUTHORITY, E.G., OFFICER, TRUSTEE, ETC.)

TO be the free and voluntary act of the section of the sect (NAME OF PERSON)

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

manname SAR (SEAL OR STAMP)

My appointment expires

11/15/96

WHEN RECORDED RETURN TO

RIVERVIEW SAVINGS BANK

Address

P.O. BOX 1068

City, State, Zip

CAMAS, WA. 98607-0068

FILED FOR RECORD SKAMANIA CO. WASH

Jun 11 _ 3 59 PM 193

GARY H. OLSON

DEED OF FULL RECONVEYANCE BOOK 135

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

MAY 04, 1992

Recorded:

MAY 06, 1992

Book: 128

516 Page:

Indexed. Ut In firect 1.1 4. Hid

County Of

Recording Number

SKAMANIA Washington

113455

State Of Grantor

Dated

STEPHEN J. SNEDEKER AND CHERYL I. BURNETT-SNEDEKER, HUSBAND AND WIFE

Trustee

RIVERVIEW SERVICES, INC.

Beneficiary

RIVERVIEW SAVINGS BANK

Legal Description

A TRACT OF LAND IN THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 3, TOWNSHIP 1 NORTH, KANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

LOT 1, OF THE BURNETT SHORT PLAT NO. 3 RECORDED IN BOOK 3 OF SHORT PLATS PAGE 157, SKAMANIA COUNTY RECORDS.

having received from the Beneficiary under said Deed of Trust, a written request to reconvey, reciting that the obligations acquired by the Beed of Trust have been fully satisfied, does hereby grant, bargain, sell and reconvey, unto the parties enfittled thereby all right, title and interest which was heretofore acquired by said Trustee(s) under said Deed

RVICES, INC.

SECRETARY

State Of Washington

County Of ___CLARK

PHYLLIS KREIBICH

I certify that I know or have satisfactory evidence that person who appeared being and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument, on oath stated that (he/she) was authorized to execute the instrument of to execute the instrument and screen leaded it as the (TYPE OF AUTHORITY, E.G., OFFICER, TRUSTEE, ETC.)

BEMALF OF WHOM THE INSTRUMENT WAS EXECUTED!

uposes mentioned in the instrument.

Dated:

My appointment expires.

स्तर **प्रदेश स्तर अन्तर ।** अस्तर स्तर प्रस्ते केन्द्र स्वत्य क्षेत्र क्षेत्र क्षेत्र स्वत्य स्वत्य स्तर स्तर स्तर

11/15/96

_to be the free and voluntary act of

The STAN (SEAL OR STAMP)