

WHEN RECORDED RETURN TO

Name RIVERVIEW SAVINGS BANK

Address P.O. BOX 1068

City, State, Zip CAMAS WA 98607-0068

LOAN # 01015000642

FILED FOR RECORD
SKAMANIA CO. WASH
BY RVSB

AUG 12 3 23 PM '94

P. Johnson
AUDITOR
GARY M. OLSON

120269

DEED OF FULL RECONVEYANCE

BOOK 145 PAGE 179

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

Dated JULY 18, 1986

Recorded: JULY 21, 1986

Recording Number 101489

Book: 101

Page: 896

County Of SKAMANIA

State Of Washington

Grantor ROBERT E. HUNTER AND PAMELA J. HUNTER, HUSBAND AND WIFE

Trustee RIVERVIEW SERVICES, INC.

Beneficiary RIVERVIEW SAVINGS BANK

Legal Description TWO PARCELS OF LAND SITUATED IN THE NORTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 30, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, SKAMANIA COUNTY, WASHINGTON, DESCRIBED AS FOLLOWS:

LOTS 2 AND 3 OF THE STANLEY WRIGHT SHORT PLAT AS RECORDED IN BOOK 2 OF SHORT PLATS ON PAGE 155, SKAMANIA COUNTY RECORDS.



Registered
Indexed, Lit
Indirect
Filed
Mailed

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

Date AUGUST 03, 1994

RIVERVIEW SERVICES, INC.
BY [Signature]
PHYLLIS KREIBICH - SECRETARY

State Of Washington }
County Of CLARK } SS

I certify that I know or have satisfactory evidence that PHYLLIS KREIBICH (NAME OF PERSON) person who appeared before me, and said person acknowledged that she had signed this instrument, on oath stated that she intended to execute the instrument and acknowledged it as the SECRETARY (TYPE OF AUTHORITY, E.G., OFFICER, TRUSTEE, ETC.) of RIVERVIEW SERVICES, INC. (NAME OF PARTY ON BEHALF OF WHOM THE INSTRUMENT WAS EXECUTED)



to be the first and principal beneficiary of such party for the uses and purposes mentioned in the instrument.

Dated: AUGUST 03, 1994

[Signature]
SIGNATURE

(SEAL OR STAMP)

My appointment expires 11/15/96