



Commonwealth.
Land Title Insurance Company
OF PHILADELPHIA

FILED FOR RECORD AT REQUEST OF

FILED FOR RECORD
THIS SPACE PROVIDED FOR RECORDER'S USE:
SKAMANIA, WASH
BY CLARK COUNTY TITLE

SEP 23 9 02 AM '94

P. Savary
AUDITOR
GARY H. OLSON

misc 8365 (SK)
WHEN RECORDED RETURN TO

Name CHICAGO TITLE

Address 11818 S.E. MILL PLAIN BLVD STE. 106

City, State, Zip VANCOUVER WA 98684

120614

Full Reconveyance

BOOK 145 PAGE 990

The undersigned as trustee under that certain Deed of Trust, dated JULY 12, 19 88,
in which EDWARD J. FREY AND CATHERINE L. FRAY is grantor
and ASSOCIATES FINANCIAL SERVICES COMPANY OF WASHINGTON, INC. A/K/A is beneficiary,
recorded on AUGUST 8, 19 88, as Auditor's File No. 105574, in Volume 110
of Mortgages, at page 446, records of CLATSOP 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 CLATSOP SKAMANIA County, Washington, as follows:

SEE SAID AUDITOR'S FILE NO

Dated AUGUST 29, 19 94

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 _____

My appointment expires _____

(SEAL OR STAMP)

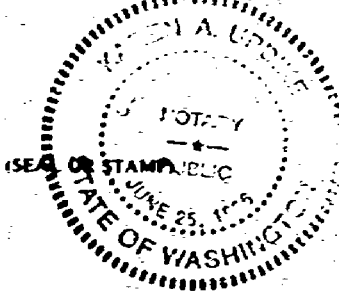
Form No. 3169

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) sign-
ed 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 to be the free and voluntary act of
such party for the uses and purposes mentioned in the instrument.



AUGUST 29, 1994

Karen A. Updike
Signature _____ Registered ☒

NOTARY

6-25-96
My appointment expires _____

Indexed, Dir ☒

Indirect ☒

Filed ☒

Waived ☒