

RECONVEYANCE NUMBER:

WA6460



Escrow Company

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY *Benevest*

MAR 13 4 36 PM '95

*P. J. Avery*  
AUDITOR  
GARY M. OLSON

FILED FOR RECORD AT REQUEST OF:

BENEFICIAL WASHINGTON INC  
P.O. BOX 3841  
VANCOUVER, WA 98662-3841

WHEN RECORDED RETURN TO:

SAME AS ABOVE

121814

BOOK 148 PAGE 674

## Full Reconveyance

The undersigned as Trustee under that certain Deed of Trust, dated AUGUST 11, 1992 in which  
DONALD L. BECKER AND BERNICE M. BECKER

BENEVEST SERVICES INC Is Grantor,  
BENEFICIAL WASHINGTON INC, d/b/a BENEFICIAL MORTGAGE CO. Is the original Trustee and  
recorded on AUGUST 24, 1992 as Auditor's File No. 114252 Is Beneficiary,  
of Mortgages, at page 340, records of SKAMANIA County, Washington. In Volume 130

Having received from the Beneficiary under the above identified Deed of Trust a written request to reconvey, reciting that the obligations secured by the Deed of Trust have been fully satisfied, the undersigned does hereby reconvey, without warranty, to the person(s) entitled thereto all of the right, title and interest not held by that Successor Trustee in and to the property described in said Deed of Trust, situated in SKAMANIA County, Washington, as follows:

"AS IN SAID DEED OF TRUST"

Unofficial Copy

Register	<input checked="" type="checkbox"/>
Index	<input checked="" type="checkbox"/>
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IN WITNESS WHEREOF, the undersigned Trustee has hereunto set his hand; if the undersigned is a corporation, it has caused its corporate name to be signed and affixed hereunto by its duly authorized officers.

Dated February 16, 1995

BENEVEST SERVICES INC.

By

Laura McRae

Assistant Secretary

STATE OF CALIFORNIA

SS.

COUNTY OF Sacramento

On February 16, 1995 before me, Debbie A. Oliver Notary Public, personally appeared Laura McRae personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

*Debbie A. Oliver*



1-5-2-165  
10-1-1255