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SKAMANIA CO, TITLE Na 18 10 an Al 197 P Lowry AFTER RECORDING MAIL TO: Name LaCamas Community Federal Credit Union GARYH. OLSON PO Box 1108 City/State Camas Wa 98607 Document Title(s): (or transactions contained therein) First American Title Insurance Company Full Reconveyance 3. Reference Number(s) of Documents assigned or released: Vol 53 Pg 386 AF 82483 7/12/76 ☐ Additional numbers on page _ of document Grantor(s): (Last name first, then first name and initials) LaCamas Community Federal Credit Union ☐ Additional names on page ____ __ of document Grantee(s): (Last name first, then first name and initials) Gustafson, Mark H , a single man 5.

Additional names on page _ of document Abbreviated Legal Description as follows: (i.e. lovblock/plat or section/township/range/quarter/quarter) Complete legal description is on page ___ of document Assessor's Property Tax Parcel / Account Number(s): NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

TRANSAMERICA TITLE INSURANCE COMPANY

THIS SPACE PROVIDED FOR RECORDER'S USE:

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Return tofreida LACAMAS COMMUNITY FEDERAL CREDIT UNION PO BOX 1108 CAMAS WA. 98607

HEN RECORDED RETURN TO

LaCamas Community Federal Credit Union (formley Crown Camas Credit Union) PO Box 1108

City, State, Zip.

Camas Wa 98607

Satisfaction of Mortgage

KNOW ALL MEN BY THESE PRESENTS: That LaCamas Community FederalCredit Union (formley Crown Camas Credit Union)

July 8, 1976 the owner and holder of that certain mortgage bearing date

Mark H Gustafson, a single man

to secure payment of the sum of Twenty-seven thousand, three hundred and forty-one ,00/100

Dollars (\$ 27,341.00) and interest,

and recorded in the office of the County Auditor of Skamania

County, State of Washington,

July 12, 1976

in Volume 53

of Mortgages, at page 386

being Auditor's File-No.

, does hereby acknowledge that the said mortgage

82483 has been FULLY SATISFIED AND DISCHARGED, and does hereby authorize and direct the said County Auditor to enter full satisfaction thereof of record.

| (Individual) | |
|---|---|
| | By William R Thanco |
| (Individual) | Vice (President) |
| | By William R Thomas |
| | (Seerstary) |
| STATE OF WASHINGTON | STATE OF WASHINGTON |
| COUNTY OF | COUNTY OF Clark. |
| I certify that I know or have satisfactory evidence | that I comife that I know as has said for a set of the set |
| Total Control of Total Salistaciony Conclude | that I certify that I know or have satisfactory evidence that William R Thomas |
| 8 | the is the person(s) who appeared before me, and said person(s) acknowledged that MO she they begin |
| person(s) who appeared before me, and said personces acknowledged that (be/she/they) signed this instrument | |
| acknowledged it to be (his/her/their) free and voluntary ac | et for of |
| the uses and purposes mentioned in the instrument. | such party for the uses and purposes mentioned in the instrument. |
| - | CTAND |
| Dated | - Mauch 5:1997 |
| Lake | (S) |
| (SEAL OR STAMP) Signature | - Mauch 5: 1997 Sugar Handeler |
| | Signature |
| Title | - Cames Usustant Br. Mage |