

132328

BOOK 179 PAGE 156

FILED FOR RECORD
SKAMANIA CO. WASH
TD Service Co

JUL 28 9 33 AM '98

O. Laury
AUDITOR
GARY H. OLSON

Recording Requested By:
TD SERVICE COMPANY

And When Recorded Mail To:
SUSAN CAIN
1992 BELLE CENTER RD
WASHOUGAL WA 98671-7525

Space above for Recorder's use

FULL RECONVEYANCE

Loan#: 0084604800 RLS#: 183813

THE UNDERSIGNED, as trustee under that certain deed of trust described below, conveying real property situated in said county and more fully described in said Deed Of Trust, having received from the beneficiary under said deed of trust a written request to reconvey, reciting that the obligation secured by said deed of trust has been fully paid and performed, hereby does grant, bargain, sell, and convey, but without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned in and to said described premises by virtue of said deed of trust.

Original Grantor: DONALD CAIN AND SUSAN CAIN, HUSBAND AND WIFE

Original Grantee: TMS MORTGAGE INC., DBA THE MONEY STORE

Current Beneficiary: TMS MORTGAGE INC., DBA THE MONEY STORE

Deed Of Trust Dated: OCTOBER 23, 1996

Recorded on: OCTOBER 30, 1996

As Instrument: 126587 Book: 160 Page: 488

Property Address: 1992 BELLE CENTER, WASHOUGAL, WA 98671

County of SKAMANIA, State Of WASHINGTON.

IN WITNESS WHEREOF, the undersigned trustee has executed this instrument, if the undersigned is a corporation, it has caused its corporate name to be signed hereunto by its officer duly authorized thereunto by order of its Board of Directors. Dated: 7-14-98

Trustee:
T.D. SERVICE COMPANY

By: *[Signature]*
Craig H. Davenport, Assistant Secretary

State of CALIFORNIA
County of ORANGE

} ss.

On 7-14-98, before me, E.M. Tolmasoff, personally appeared Craig H. Davenport, Assistant Secretary (X) 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.

E.M. Tolmasoff
(Notary Name): E.M. Tolmasoff

