EXCEPT that portion of property quit claimed to LEROY GOODRICH and DOROTHY DARLENE GOODRICH, by boundary adjustment deed recorded and described in records of Skamania County, Auditor's File Number 2006161681.

Tax Parcel 04 07 26 4 0 0400 00 described as:

All that portion of the South Half of the Southeast Quarter of Section 26 Township 4 North, Range 7 East of the Willamette Meridian lying northerly of Trout Creek; bounded on the west by the east line of that parcel of land granted to Norman F. Erken and Nancy R. Erken by Statutory Warranty Deed recorded September 14, 1966 at Book 56 Page 247, records of Skamania County, Washington; and bounded on the east by the west line at its northernmost projection lying north of Trout Creek, of that parcel of land conveyed to Crown Zellerbach Corporation by Warranty Deed recorded February 19, 1975 at Book 68 Page 388, records of Skamania County, Washington.

Skamania County Assessor

Date 16/3/17 Parcell 4-726-4-800,400
WHEREAS; NORMAN ERKEN and NANCY ERKEN, Husband and Wife,

GRANTORS, and NORMAN and NANCY ERKEN, Husband and Wife, GRANTEES, wish to adjust their respective properties through a boundary line adjustment.

WHEREAS; The purpose of this deed is to effect a boundary line adjustment between two parcels of land owned by Grantors and Grantees. It is not intended to create a separate parcel and is therefore exempt from the requirements of RCW 58.17 and the Skamania County Short Plat Ordinance. The property conveyed by this deed cannot be further subdivided and conveyed without conforming to the laws of the State of Washington and the Skamania County Subdivision Ordinance.

NOW THEREFORE, for the purposes of adjusting boundaries, NORMAN ERKEN and NANCY ERKEN, Husband and Wife, GRANTORS, convey and quit claim to NORMAN ERKEN and NANCY ERKEN, Husband and Wife, GRANTEES, the following

described property, including any after acquired property:

Tax Parcel 04 07 26 4 0 0300 00 described after boundary line adjustment as:

A tract of land located in a portion of the West half of the Southeast quarter of Section 26, Township 4 North, Range 7 East, Willamette Meridian, Skamania County, Washington, more particularly described in Exhibit "A" attached hereto and incorporated herein as if fully set forth and as shown in the sketch attached hereto as Exhibit "C".

Tax Parcel 04 07 26 4 0 0400 00 described after boundary line adjustment as:

A tract of land located in a portion of the Northwest of the Southeast quarter of Section 26, Township 4 North, Range 7 East, Willamette Meridian, Skamania County, Washington, more particularly described in Exhibit "B" attached hereto and incorporated herein as if fully set forth and as shown in the sketch attached hereto as Exhibit "D".

DATED this 1st day of September, 2007.

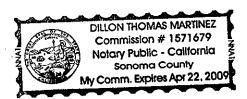
NORMAN ERKEN, GRANTOR

NANCY ERKEN, GRANTOR

w/w

State of _	CA	_)	
County o	fSonoma	,	S

I certify that I know or have satisfactory evidence that NORMAN ERKEN and NANCY ERKEN are the persons who appeared before me and said persons acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes mentioned in the instrument.



Dated: 10-1-07

Odl, D.

(Signature)

NOTARY PUBLIC

Dillow Thema Marketa

Print Name of Notary

My appointment expires: 4-22-2009

SEE ATTACHED NOTARY FORM

msm-

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State of California On 10-1-0 before me, Dillow Thomes Name and Title of O personally appeared Norman Erken, Norman personally known to me (or proved to me on the basis of satisfactory evidence) to be the person s) whose name is in are subscribed to the **DILLON THOMAS MARTINEZ** Commission # 1571679 within instrument and acknowledged to me that Notary Public - California be she (they executed the same in his/her/their) authorized capacity(ies), and that by his/her/their signature(spon the Sonoma County My Comm. Expires Apr 22, 2009 instrument the person(s) or the entity upon behalf of which the person(6) acted, executed the instrument. WITNESS my hand and official seal. Place Notary Seal Above **OPTIONAL** Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document. **Description of Attached Document** Title or Type of Document: ____ Number of Pages: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: _ Signer's Name: _ □ Individual □ Individual ☐ Corporate Officer — Title(s): _ \square Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General RIGHT THUMBPRINT OF SIGNER ☐ Partner — ☐ Limited ☐ General RIGHT THUMBPRINT OF SIGNER ☐ Attorney in Fact ☐ Attorney in Fact Top of thumb here Top of thumb here □ Trustee ☐ Trustee ☐ Guardian or Conservator ☐ Guardian or Conservator ☐ Other: ☐ Other: Signer Is Representing: Signer is Representing: _

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

 $m \supset m \subset$

EXHIBIT "C"

JOB NO: 07-007

DATE: 08-05-07

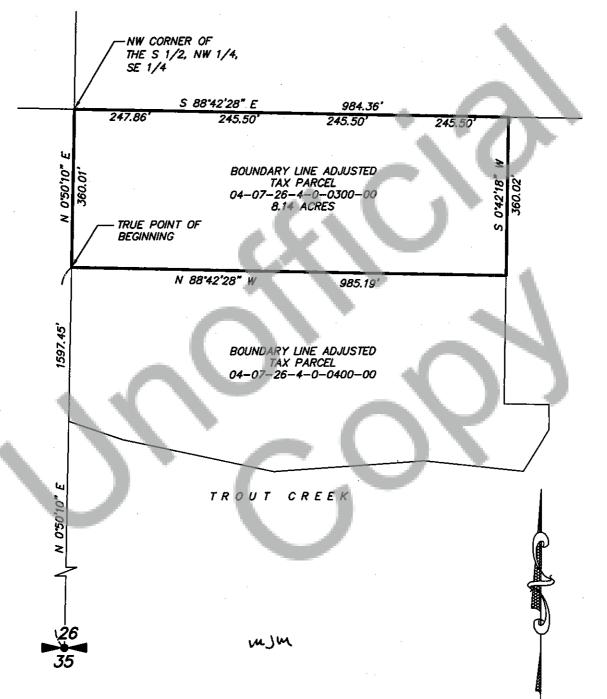
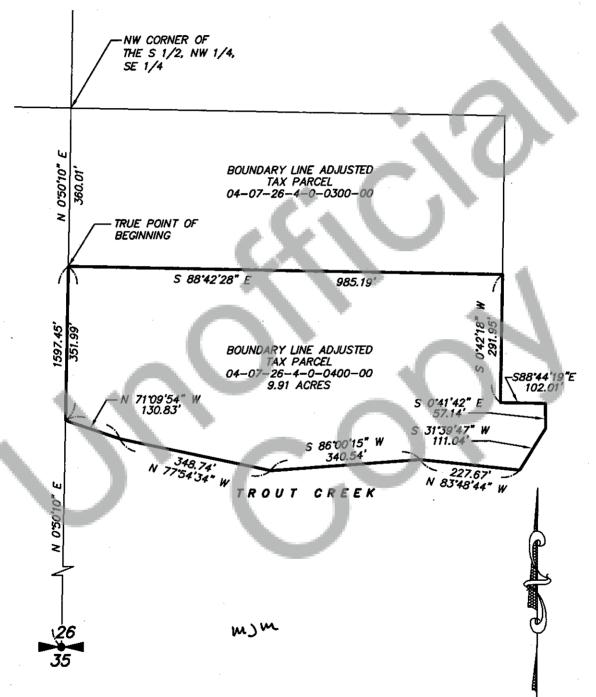


EXHIBIT "D"

JOB NO: 07-007

DATE: 08-05-07



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