

WHEN RECORDED MAIL TO:  
Quality Loan Service Corp. of Washington  
C/O Quality Loan Service Corporation  
411 Ivy Street  
San Diego, CA 92101

T.S. No.: WA-14-654002-SW  
Order No.: 140940923-WA-MSO

SPACE ABOVE THIS LINE FOR RECORDER'S USE

### NOTICE OF DISCONTINUANCE OF TRUSTEE'S SALE

APN No.: 02062800100200

**GUY D NAB AND SALLY E NAB , HUSBAND AND WIFE AND BEAU D NAB , AN UNMARRIED INDIVIDUAL WITH RIGHTS OF SURVIVORSHIP** is the grantor, and **CLARK COUNTY TITLE COMPANY, A WASHINGTON CORPORATION** is the original trustee, and **WASHINGTON MUTUAL BANK** is the original beneficiary under that certain deed of trust dated 8/2/1999, and recorded on 8/6/1999 under Auditor's File No. **135936 in Book 192 Page 110** records of **SKAMANIA County, Washington**.

**QUALITY LOAN SERVICE CORPORATION OF WASHINGTON**, trustee, hereby discontinues the trustee's sale set by the Notice of Trustee's Sale recorded on 3/30/2016, under Auditors number 2016000580 records of **SKAMANIA County, Washington**.

**Said Deed of Trust encumbers the real property fully described as:**

A TRACT OF LAND IN THE NORTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 28, TOWNSHIP 2 NORTH, RANGE 6 EAST OF THE WILLAMETTE MERIDIAN, SKAMANIA COUNTY, WASHINGTON, DESCRIBED AS FOLLOWS: LOT 1 OF THE MACDONALD SHORT PLAT, RECORDED IN BOOK 3 OF SHORT PLATS, PAGE 253, SKAMANIA COUNTY RECORDS.

And more commonly known as: **1922 DUNCAN CREEK RD, STEVENSON, WA 98648**

T.S. No.: **WA-14-654002-SW**

This discontinuance shall not be construed as waiving any breach or default under the above referenced deed of trust, or as impairing any right or remedy thereunder, or as modifying or altering in any respect any of the terms, covenants, conditions or obligations thereof, but is and shall be deemed to be only an election to not allow the sale to be made pursuant to the above referenced Notice of Trustee's Sale.

Dated:

6.28.16

Quality Loan Service Corporation of Washington

Lanisha McClain

By: Lanisha McClain

Its: Assistant Secretary

State of : Washington)

County of: King)

I certify that I know or have satisfactory evidence that Lanisha McClain is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument

Dated:

6/28/16

Susann Staton

Signature

Title

My appointment expires:

8-7-2019

