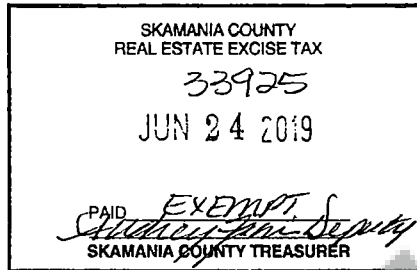


Skamania County, WA  
Total: \$100.00  
DEED  
Pgs=2  
Request of: LAURA S. NELSON, SAMUEL YOELIN KANTOR  
2019-001049  
06/24/2019 03:36 PM  
00000161201900010490020027

After recording, return to:

LAURA S. NELSON, Attorney  
SAMUELS YOELIN KANTOR, LLP  
111 SW 5<sup>th</sup> Avenue  
Suite 3800  
Portland, OR 97204



Tax Parcel No. 03102132010300

Space Above for Recording Information Only

Abbreviated Legal Description: LOTS 5 & 6 ORINGTON HEIGHTS BK A PG 146

### BARGAIN AND SALE DEED

GRANTOR: ELLIOT S. SOLWAY and YOLANDA R. SOLWAY, Husband & Wife

GRANTEE: ELLIOT S. SOLWAY & YOLANDA R. SOLWAY, TRUSTEES of the SOLWAY REVOCABLE LIVING TRUST, dated June 7, 2019.

THE GRANTOR, **ELLIOT S. SOLWAY** and **YOLANDA R. SOLWAY**, Husband & Wife, for valuable consideration, bargains, sells and conveys to GRANTEE, **ELLIOT S. SOLWAY & YOLANDA R. SOLWAY, TRUSTEES of the SOLWAY REVOCABLE LIVING TRUST**, dated June 7, 2019, their entire interest, being an undivided one hundred percent (100%) interest, including any after-acquired interest, in and to the following described real estate situated in Skamania County, Washington:

Lots 5 and 6, ORINGTON HEIGHTS, according to the recorded plat thereof, recorded in Book A of Plats, Page 146, in the County of Skamania, State of Washington.

SUBJECT TO covenants, restrictions, easements, conditions and reservations of record and existing boundary lines and encroachments.

Skamania County Assessor

Date 6-24-19 Parcel# 03102132010300

The liability and obligations of the Grantor to the Grantees and Grantees' successors under the warranties contained herein shall be limited to the amount, nature, and terms of any title insurance coverage available to the Grantor under any title insurance policy. The Grantor shall have no liability or obligations except to the extent that reimbursement for such liability or obligation is available to the Grantor under any title insurance policy.

DATED this 19<sup>th</sup> day of June, 2019.

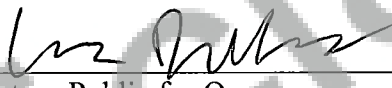
  
\_\_\_\_\_  
ELLIOT S. SOLWAY, Grantor

STATE OF OREGON            )  
  ) ss.  
County of Hood River        )

I certify that I know or have satisfactory evidence that **ELLIOT S. SOLWAY**, Grantor, is the person who appeared before me and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the sues and purposes mentioned in the instrument.

DATED: June 19th, 2019.



  
\_\_\_\_\_  
Notary Public for Oregon  
My appointment expires: 6/2/23

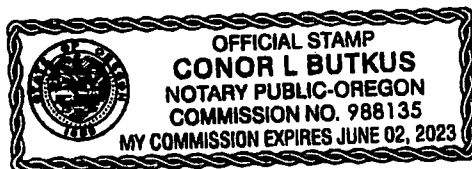
DATED this 19<sup>th</sup> day of June, 2019.


  
\_\_\_\_\_  
YOLANDA R. SOLWAY, Grantor

STATE OF OREGON            )  
  ) ss.  
County of Hood River        )

I certify that I know or have satisfactory evidence that **YOLANDA R. SOLWAY**, Grantor, is the person who appeared before me and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the sues and purposes mentioned in the instrument.

DATED this 19<sup>th</sup> day of June, 2019.



  
\_\_\_\_\_  
Notary Public for Oregon  
My appointment expires: 6/2/23