... of said County.

TITLE

Deputy

Witness my hand and seal of

Record of .....

County affixed.

NAME



Beneficiary.

COLLECTION ESCROW DEPARTMENT

ASPEN TITLE & ESCROW, INC.

After Recording Return to (Name, Address, Zip): 198229 19822



which are in excess of the amount required to pay all reasonable costs, expenses and attorney's tees necessarily paid or incurred by firstorin such proceedings, shall be paid to beneficiary and applied by it first upon any reasonable costs and expenses and attorney's teas, both in the trial and appellate courts, necessarily paid or incurred by beneficiary in such proceedings, and the belance applied upon the indebtedness secured hereby; and grantor agrees, at its own expense, to take such actions and execute such instruments as shall be necessary in obtaining and conceptuality of the process of the indebtedness, trustee may (a) consent to the making of any map or plant of the processory, without variantly, all or any part of the property. The grantes in any reconveyantly; (b) pini in gring any eason and the indebtedness, trustee may (a) consent to the making of any map or plant of the processory and precision of the processory of the processor of the processory of the processory of the processory of the processor of the processor

and that the grantor will warrant and torever defend the same against all persons whomsoever.

The grantor warrants that the proceeds of the loan represented by the above described note and this trust deed are:

(a)\* primarily for grantor's personal, family or household purposes (see Important Notice below),

(b) for an organization, or (even it grantor is a natural person) are for business or commercial purposes.

This deed applies to, inures to the benefit of and binds all parties hereto, their heirs, legatees, devisees, administrators, executors, personal representatives, successors and assigns. The term beneficiary shall mean the holder and owner, including pledgee, of the contract secured hereby, whether or not named as a beneficiary herein.

made, assumed and implied	to make the provisio	ns hereof apply equ	tally to corporations	I that generally all gr and to individuals.	more than one person; that ammatical changes shall be first above written.
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* IMPORTANT NOTICE: Delete, not applicable; if warranty (a) as such word is defined in th beneficiary MUST. comply with disclosures; for this purpose u If compliance with the Act is:	is applicable and the bo te Truth-in-Lending Act of the Act and Regulation te Stevens-Ness Form No	ineficiary is a credito and Regulation Z, the by making required 1319, or equivalent	TOWER S.	TOTAL STATE OF THE	45
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	by		***************************************	***************************************	***************************************
TO THE PARTY OF THE PARTY.	as of	·-····			***************************************
NOT	OFFICE SEAL GENINE JOHNSON ARY PUBLIC - OREGON IMISSION NO. 018718	H	My commission e	ohnsm	otary Public for Oregon
MY COMMIS	Sion expres sept. 28, 1	996 p. \$ 100 j. j. j. j. j. Magaza	My commission e	xpires	.1.(2)
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STATE OF OREGON: CO	OUNTY OF KLAM	ATH: ss.		• • • • • • • • • • • • • • • • • • •	
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and the second s				n County C	llerk
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By Queline Mullenslar