

'98 NOV -2 P3:39

MTC 44900

Return to:  
Brandness, Brandness &  
Rudd, P.C.  
411 Pine Street  
Klamath Falls, Oregon 97601

Clerk's Stamp:

## AFFIDAVIT

STATE OF OREGON       )  
                              ) ss:  
County of Klamath     )

I, Chris Powell, being first duly sworn, depose and say as follows:

1. I am employed as a process server by Jefferson State Adjusters.

2. On or about June 30, 1998, I received for service Trustee's Notice of Default and Election to Sell and of Sale for service on the occupants of the nine units at Midtown Apartments located at 1131 Walnut, Klamath Falls, Oregon.

3. Through my previous employment with First Choice Property Management I was aware that First Choice Property Management was the property manager for this apartment complex.

4. Through information provided by First Choice Property Management I learned that five of the nine units were vacant, that being units 161, 164, 265 and 268.

5. When serving the occupants of the occupied units, I checked the units listed as vacant by looking into the windows. Each of the five units were unoccupied.

Chris Powell

Chris Powell

SUBSCRIBED AND SWORN to before me this 14 day of July, 1998.



Karen A. Baker  
Notary Public for Oregon  
My Commission expires: 10-28-01

PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS

40179

STATE OF OREGON  
COUNTY OF Clatsop

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Subpoena |                                   |

☒ Trustee's Notice of Sale

For the within named: Occupants 1131 Walnut  
Midtown Apartments

☒ PERSONALLY SERVED: Original or True Copy to within named, personally and in person to: Rose Marie Guerra at the address below.

☐ SUBSTITUTE SERVICE: By delivering an Original or True Copy to \_\_\_\_\_ a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for: \_\_\_\_\_

☐ OFFICE SERVICE: At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.

Upon \_\_\_\_\_, by (a) delivering such true copy personally and in person, Corporation, Limited Partnership, etc.

to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or  
(b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ OTHER METHOD: \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☐ NOT FOUND: I certify that I received the within document for service on \_\_\_\_\_ and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, \_\_\_\_\_ within \_\_\_\_\_ County.

1131 Walnut #1162  
ADDRESS OF SERVICE STREET  
Clatsop Falls, OR 97601  
CITY STATE ZIP

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998 2:45 a.m. ☒ Chris Povee  
DATE OF SERVICE TIME OF SERVICE SIGNATURE

or not found  
PRINTED IN OREGON

TEX 212



**PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS**

**40180**

STATE OF OREGON  
COUNTY OF Klamath

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Subpoena |                                   |

For the within named: Occupants 1131 Walnut  
Midtown Apartments

☒ **PERSONALLY SERVED:** Original or True Copy to within named, personally and in person to: Doreen Moore and Tom Wilkinson at the address below.

☐ **SUBSTITUTE SERVICE:** By delivering an Original or True Copy to \_\_\_\_\_ a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for: \_\_\_\_\_

☐ **OFFICE SERVICE:** At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ **SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.**

Upon \_\_\_\_\_ Corporation, Limited Partnership, etc., by (a) delivering such true copy personally and in person, to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or (b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ **OTHER METHOD:** \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☐ **NOT FOUND:** I certify that I received the within document for service on \_\_\_\_\_ and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, \_\_\_\_\_ within \_\_\_\_\_ County.

1131 Walnut # 1123  
ADDRESS OF SERVICE STREET  
Klamath Falls, OR UNIT / APT / SPC# 97601  
CITY STATE ZIP

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998 2:40 a.m. ☒ p.m.  
DATE OF SERVICE TIME OF SERVICE  
Chris Powell  
SIGNATURE

or not found  
PRINTED IN OREGON

PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS

40181

STATE OF OREGON  
COUNTY OF Klamath

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Subpoena |                                   |

For the within named: Occupants 1131 Walnut  
Medtown Apartments

☒ PERSONALLY SERVED: Original or True Copy to within named, personally and in person to: Theron Moore at the address below.

☒ SUBSTITUTE SERVICE: By delivering an Original or True Copy to Theron Moore  
Eldon Moore a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for:

☐ OFFICE SERVICE: At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.

Upon \_\_\_\_\_, by (a) delivering such true copy personally and in person, Corporation, Limited Partnership, etc.

to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or  
(b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ OTHER METHOD: \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☐ NOT FOUND: I certify that I received the within document for service on \_\_\_\_\_ and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, \_\_\_\_\_ within \_\_\_\_\_ County.

1131 Walnut #216  
ADDRESS OF SERVICE STREET  
Klamath Falls, OR UNIT / APT / SPC#  
CITY STATE ZIP  
97601

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998 5:05 a.m. ☐ a.m. ☒ p.m.  
DATE OF SERVICE TIME OF SERVICE  
Chris Powell  
or not found SIGNATURE  
PRINTED BY OREGON



**PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS**

40182

STATE OF OREGON  
COUNTY OF Klamath

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause |                                   | <input type="checkbox"/> Subpoena |

For the within named: Occupants 1131 Walnut  
Midtown Apartments

☒ **PERSONALLY SERVED:** Original or True Copy to within named, personally and in person to: Bathleen Bicknell at the address below.

☐ **SUBSTITUTE SERVICE:** By delivering an Original or True Copy to \_\_\_\_\_ a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for: \_\_\_\_\_

☐ **OFFICE SERVICE:** At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ **SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.**  
Upon \_\_\_\_\_, by (a) delivering such true copy personally and in person, to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or (b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ **OTHER METHOD:** \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☐ **NOT FOUND:** I certify that I received the within document for service on \_\_\_\_\_ and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, \_\_\_\_\_ within \_\_\_\_\_ County.

1131 Walnut #267  
ADDRESS OF SERVICE STREET  
Klamath Falls,  
CITY

OR STATE 97601 ZIP

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998 DATE OF SERVICE 2:50 a.m. ☐ p.m. ☒ Chris Powell SIGNATURE

or not found  
PRINTED IN OREGON

PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS

40183

STATE OF OREGON  
COUNTY OF Klamath

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause |                                   | <input type="checkbox"/> Subpoena |

For the within named: Occupants 1131 Walnut  
Mid-town Apartments

☒ PERSONALLY SERVED: Original or True Copy to within named, personally and in person to: Vincent Foster at the address below.

☐ SUBSTITUTE SERVICE: By delivering an Original or True Copy to \_\_\_\_\_ a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for:

☐ OFFICE SERVICE: At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.  
Upon \_\_\_\_\_ Corporation, Limited Partnership, etc., by (a) delivering such true copy personally and in person, to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or

(b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ OTHER METHOD: \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☐ NOT FOUND: I certify that I received the within document for service on \_\_\_\_\_ and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, \_\_\_\_\_ within \_\_\_\_\_ County.

1131 Walnut # 2169  
ADDRESS OF SERVICE STREET  
Klamath Falls, OR 97601  
CITY STATE ZIP

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998  
DATE OF SERVICE  
PRINTED IN OREGON

2:50 a.m. ☐ p.m. ☒  
TIME OF SERVICE

Chris Powell  
SIGNATURE



40184

**PROOF OF SERVICE  
JEFFERSON STATE ADJUSTERS**

STATE OF OREGON  
COUNTY OF

Klamath

COURT CASE NO. \_\_\_\_\_

I hereby certify that I served the foregoing individuals or other legal entities to be served, named below, by delivering or leaving true copies or original, certified to be such by the Attorney for the Plaintiff/Defendant, as follows:

- |   |                                    |  |                                   |                                   |
|---|------------------------------------|--|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Summons & Complaint    | <input type="checkbox"/> Summons   | <input type="checkbox"/> Small Claim         | <input type="checkbox"/> Motion   | <input type="checkbox"/> Answer   |
| <input type="checkbox"/> Restraining Order      | <input type="checkbox"/> Judgment  | <input type="checkbox"/> Affidavit           | <input type="checkbox"/> Petition | <input type="checkbox"/> Letter   |
| <input type="checkbox"/> Summons & Petition     | <input type="checkbox"/> Order     | <input type="checkbox"/> Decree              | <input type="checkbox"/> Notice   | <input type="checkbox"/> Citation |
| <input type="checkbox"/> Notice of Small Claims | <input type="checkbox"/> Complaint | <input type="checkbox"/> Order to Show Cause | <input type="checkbox"/> Subpoena |                                   |

☒ Trusted Notice of Sale

For the within named:

Occupants 1131 Walnut  
Midtown Apartments

☐ PERSONALLY SERVED: Original or True Copy to within named, personally and in person to: \_\_\_\_\_ at the address below.

☐ SUBSTITUTE SERVICE: By delivering an Original or True Copy to \_\_\_\_\_, a person over the age of 14 who resides at the place of abode of the within named at said abode shown below for: \_\_\_\_\_

☐ OFFICE SERVICE: At the office which he/she maintains for the conduct of business as shown at the address below, by leaving such true copy or Original with \_\_\_\_\_, the person who is apparently in charge.

☐ SERVICE ON CORPORATIONS, LIMITED PARTNERSHIPS OR UNINCORPORATED ASSOCIATIONS SUBJECT TO SUIT UNDER A COMMON NAME.

Upon \_\_\_\_\_, by (a) delivering such true copy personally and in person, Corporation, Limited Partnership, etc.

to: \_\_\_\_\_ who is a/the \_\_\_\_\_ thereof, or  
(b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the office of \_\_\_\_\_, who is a/the \_\_\_\_\_ thereof.

☐ OTHER METHOD: \_\_\_\_\_ By leaving an Original or True Copy with \_\_\_\_\_

☒ NOT FOUND: I certify that I received the within document for service on June 30, 1998 and after due and diligent search and inquiry, I hereby return that I have been unable to find, the within named respondent, Occupants of 1131 Walnut within Klamath County.  
#101, #104, #265, #268 All units listed are vacant units.

1131 Walnut #104, #101, #265, #268  
ADDRESS OF SERVICE STREET UNIT / APT / SPC#  
Klamath Falls, OR 97601  
CITY STATE ZIP

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon and that I am not a party to nor an officer, director, or employee of nor attorney for any party, corporation or otherwise, that the person, firm or corporation served by me is the identical person, firm, or corporation named in the action.

July 1, 1998 2:40 a.m. ☐ p.m. Chris Powell  
DATE OF SERVICE TIME OF SERVICE SIGNATURE

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Amerititle the 2nd day  
of November A.D., 19 98 at 3:39 o'clock P.M., and duly recorded in Vol. M98  
of Mortgages on Page 40178

FEE \$40.00

By Kathleen Rosen Bernetha G. Letsch, County Clerk