

After recording return to: William M. Ganong  
Attorney at Law  
514 Walnut Avenue  
Klamath Falls, OR 97601

State of Oregon, County of Klamath  
Recorded 04/16/2003 9:32 A.m.  
Vol M03 Pg 23998 - 005  
Linda Smith, County Clerk  
Fee \$ 56 # of Pgs 8

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**AFFIDAVIT OF MAILING  
TRUSTEE'S NOTICE OF SALE**

STATE OF OREGON, County of Klamath, ss:

I, William M. Ganong, Attorney at Law, 514 Walnut Avenue, Klamath Falls, Oregon 97601, being first duly sworn, depose, say and certify that:

I am the Trustee or Successor Trustee for the Trust Deed more particularly described in the Notice of Default and Election to Sell and Trustee's Notice of Sale recorded in Volume M02 at page 74422 of the records of the Clerk of Klamath County, Oregon.

On December 20, 2002, I deposited with the United States Postal Service at Klamath Falls, Oregon, sealed envelopes each containing a Trustee's Notice of Sale executed by me and containing the information shown on the Trustee's Notice of Sale attached hereto. I mailed one such envelope by First Class Mail and one such envelope by Certified Mail with Return Receipt Requested, postage prepaid, to each of the following named parties at the following addresses:

Allen D. Merck  
1967 Lawrence Street  
Klamath Falls OR 97601

Occupant  
1967 Lawrence Street  
Klamath Falls OR 97601

Linda M. Speers  
1953 Lawrence Street  
Klamath Falls OR 97601

William F. Speers  
1953 Lawrence Street  
Klamath Falls OR 97601

23999

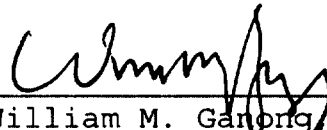
Associates Financial Services  
Company of Oregon, Inc.  
2848 South Sixth Street  
Klamath Falls OR 97603

Carter Jones Collection  
1143 Pine Street  
Klamath Falls OR 97601

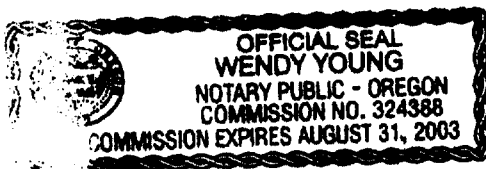
American Contractors Indemnity Co.  
9841 Airport Blvd. 9th Floor  
Los Angeles CA 90045

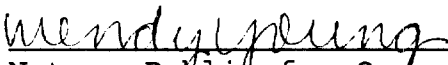
Said persons include: (a) the grantor in the trust deed; (b) any successor in interest to the grantor whose interest appears of record or of whose interest the trustee or the beneficiary has actual notice; (c) any person or agency having a lien or interest subsequent to the Trust Deed, which lien or interest appears of record or which the beneficiary has actual notice; and (d) any person requesting notice as provided in ORS 86.785.

The addresses shown above are the last known addresses of said parties.

  
\_\_\_\_\_  
William M. Ganong, OSB No. 78213  
Successor Trustee

This instrument was acknowledged before me on the 7<sup>th</sup> day of April, 2003 by William M. Ganong as Successor Trustee.



  
\_\_\_\_\_  
Notary Public for Oregon  
My commission expires: 8-31-2003

## AMENDED TRUSTEE'S NOTICE OF SALE

YOU ARE GIVEN NOTICE: THAT THE BENEFICIARY AND TRUSTEE HAVE ELECTED TO SELL THE PROPERTY DESCRIBED BELOW TO SATISFY THE FOLLOWING DESCRIBED OBLIGATION:

1.   A.   Grantor:       Allen D. Merck  
      B.   Trustee:     William M. Ganong  
      C.   Beneficiary: William R. Addington and Marlene T.  
              Addington
2.   The legal description of the property covered by the subject Trust Deed is:

The E ½ of Lot 21 and all of Lot 22, Block 8,  
HILLSIDE ADDITION TO THE CITY OF KLAMATH FALLS,  
in the County of Klamath, State of Oregon.

Klamath County Assessor's Account No.  
3809-29AA-5100.

The book, page number, and the date the subject Trust Deed was recorded in the Mortgage Records of Klamath County, Oregon are:

Book: M99           Page: 28421       Date Recorded: July 16, 1999

3.   The default for which the foreclosure is made is the Grantor's failure to make installment payments in the sum of \$1,000 each, twice each month commencing February 16, 2002, and continuing until the interest accrued on the principal balance was paid in full, and then continuing until the monthly installment payments required by the Promissory Note were paid one full month in advance. Thereafter, Grantor was to resume payment of the monthly payment required by the Promissory Note. As of the date of this Notice, Grantor has failed to pay seven \$1,000 installment payments that were due and payable prior to December 17, 2002.

4.   The amount owing on the obligation secured by the subject Trust Deed as of December 17, 2002 is \$134,267, plus interest at the note rate of 9.0% per annum from July 14, 2002 until paid.

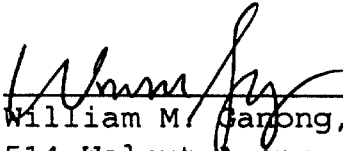
5. The Beneficiary and the Trustee have elected to foreclose the above referenced Trust Deed pursuant to the provisions of Oregon Revised Statutes 86.705 to 86.795.

6. The Trustee will conduct a sale of the above described property at 10:00 a.m. on the 24th day of April, 2003, at the front entrance to the office of William M. Ganong at 514 Walnut Avenue, Klamath Falls, Oregon.

7. Pursuant to ORS 86.753, the Grantor, the Grantor's successor in interest to all or any part of the above described property, any beneficiary under a subordinate Trust Deed, or any person having a subordinate lien or encumbrance of record on the property, may cure the default or defaults at any time prior to five days before the above said date of sale by paying the entire amount due at the time of cure under the terms of the obligation, other than such portion as would not then be due had no default occurred. In addition, the person affecting the cure shall pay all costs and expenses actually incurred in enforcing the obligation and Trust Deed, together with the Trustee's and attorney's fees specified in the said statute.

In construing this instrument, the masculine gender includes the feminine and the neuter, the singular includes the plural, the word "grantor" includes any successor in interest to the grantor as well as any other persons owing an obligation, the performance of which is secured by said Trust Deed, the words "trustee" and "beneficiary" include their respective successors in interest, if any.

Dated this 18th day of December, 2002.

  
\_\_\_\_\_  
William M. Ganong, Trustee  
514 Walnut Avenue  
Klamath Falls OR 97601  
Tel: (541) 882-7228

**NOTICE REQUIRED BY THE FAIR DEBT COLLECTION  
PRACTICES ACT, 15 U. S. C. § 1692**

This is an attempt to collect a debt and any information obtained will be used for that purpose.

1. The amount of the debt is stated in the Trustee's Notice of Sale attached hereto.
2. The beneficiary named in the attached Trustee's Notice of Sale is the creditor to whom the debt is owed.
3. The debt described in the Trustee's Notice of Sale attached hereto will be assumed to be valid by the trustee unless the debtor, within 30 days after the receipt of this notice, disputes the validity of the debt or some portion of it.
4. If the debtor notifies the trustee in writing within 30 days of receipt of this notice that the debt or any portion thereof is disputed, the trustee will provide verification of the debt, and a copy of the verification will be mailed to the debtor by the trustee.
5. If the creditor named as beneficiary in the attached Trustee's Notice of Sale is not the original creditor, and if the debtor makes a written request to the trustee within 30 days from receipt of this notice, the name and address of the original creditor will be mailed to the debtor by the trustee.
6. Written requests or objections should be addressed to: William M. Ganong, Attorney at Law, 514 Walnut Avenue, Klamath Falls, Oregon 97601.

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Allen D. Merck  
1967 Laurena St  
Klamath Falls OR  
97601

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Allen D. Merck*

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

S. MERCK

## C. Date of Delivery

12/21/02

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

## 2. Article Number

(Transfer from service label)

7000 0520 0012 5821 2076

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

William F. Speers  
1953 Laurena St.  
Klamath Falls OR  
97601

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Linda Speers*

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

## 2. Article Number

(Transfer from service label)

7000 0520 0012 5821 2038

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Linda M Speers  
1953 Lawrence St  
Klamath Falls OR  
97601

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Linda Speers*

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

## 2. Article Number

(Transfer from service label)

7002 0460 0000 2290 9010

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Associates Financial  
Service Company  
2848 56th Street  
Klamath Falls OR  
97603

2. Article Number

(Transfer from service label)

7000 0520 0012 5823-8157

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Heather Leaney*☐ Agent☐ Addressee

B. Received by (Printed Name)

D. Leaney

C. Date of Delivery

12/23/02

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Occupant  
1967 Laurence St  
Klamath Falls OR  
97601

2. Article Number

(Transfer from service label)

7000 0520 0012 5820 3463

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *S. Merck*☐ Agent☐ Addressee

B. Received by (Printed Name)

S. MERCK

C. Date of Delivery

12/21/02

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Carter Jones Collection  
1143 Pine Street  
Klamath Falls OR  
97601

2. Article Number

(Transfer from service label)

7000 0520 0012 5767-8187

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Candice Y B...*☐ Agent☐ Addressee

B. Received by (Printed Name)

Candice Y B...

C. Date of Delivery

12-23

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

24005

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>SB</i></p>	
		B. Received by (Printed Name)	C. Date of Delivery 12-27-02
<p>1. Article Addressed to:</p> <p>American Contractors Indemnity Co. 9841 Airport Blvd. <i>9th Floor</i> Los Angeles CA 90045</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>			
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p>			