2008-001132 Klamath County, Oregon

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01/28/2008 03:27:09 PM

Fee: \$26.00

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RECORDING REQUESTED BY Equipoint Financial Network, Inc

AND WHEN RECORDED MAIL TO: Equipoint Financial Network, Inc 3256 Penryn Road, Suite 100 Loomis, California 95650

FHA Case Number: 431-4340161-952 Loan Number: 33743

Title Order Number: FHA Originator No:

Space above this line for recorder's use

CORPORATION ASSIGNMENT OF DEED OF TRUST

FOR VALUE RECEIVED, the undersigned hereby grants, sells, assigns and transfers to JAMES B. NUTTER & COMPANY, whose address is 4153 BROADWAY, KANSAS CITY, MISSOURI 64111-2169 all beneficial interest under that Certain Deed of Trust dated January 15, 2008 executed by Doyle D. Horton and Alice M. Horton, as tenants by the entirety, Borrower, to Equipoint Financial Network, Inc, a California Corporation, Lender, and recorded concurrently herewith in the County Recorder's office of KLAMATH County, OREGON, describing land therein as: Legal description attached hereto as Exhibit A and by this reference made a part hereof **January 22, 2008 in 2008-000896

TOGETHER with the note or notes therein described or referred to, the money due and to become due thereon with interest, and all rights accrued or to accrue under said Deed of Trust.

Equipoint Financial Network, Inc a California Corporation Ву 7, Specutions Title: EV STATE OF OREGON COUNTY OF On before me, a Notary Public in and for said County and State, personally appeared personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or entity upon behalf of which the person(s) acted executed the instrument. WITNESS my hand and official seal Signature otary Public

ZOHUT

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of Placer	
On January 15,2008 before me, Barbar, personally appeared Jean Mills	(Here Insert name and title of the officer)
who proved to me on the basis of satisfactory evidence the within instrument and acknowledged to me the capacity (16/s), and that by his/her/their signature (5/s) which the person (5/s) acted, executed the instrument	dence to be the person(s) whose name(s) is/are subscribed to nat he/she/they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of t.
	e laws of the State of California that the foregoing paragrapl
WITNESS my hand and official seal. Signature of Notary Public	BARBARA LEWIS Commission # 1689996 Notary Public - California Placer County My Comm. Expires Aug 26, 2010
ADDITIONAL OF	PTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Corporation Additional of (Title or description of attached document) Deta of Trust (Title or description of attached document continued)	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
Number of Pages Document Date Horton (Additional information)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
☐ Attorney-in-Fact ☐ Trustee(s) ☐ Other	 Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary). Securely attach this document to the signed document
2008 Version CAPA v12 10 07 800.873 0865	