

NTC 84912

2009-012769

Klamath County, Oregon

RECORDING COVER SHEET

Pursuant to ORS 205.234



00073231200900127690100105

09/25/2009 03:26:00 PM

Fee: \$71.00

AFTER RECORDING RETURN TO:

JOHN A. BERGE
AS SUCCESSOR TRUSTEE
BRYANT, LOVLIE & JARVIS, P.C.
P.O. BOX 880
BEND, OR 97709-0880

1. AFFIDAVIT OF MAILING NOTICE OF SALE
- Notice of Sale
2. AFFIDAVIT OF PUBLICATION
3. AFFIDAVIT OF NON-OCCUPANCY

Original Grantor(s) on Trust Deed: C Corp, Inc., an Oregon corporation

Beneficiary: Running Y Resort Inc., an Oregon corporation

THIS COVERSHEET HAS BEEN PREPARED BY THE PERSON PRESENTING THE
ATTACHED INSTRUMENT FOR RECORDING. ANY ERRORS CONTAINED IN THIS
COVERSHEET DO NOT AFFECT THE TRANSACTION(S) CONTAINED IN THE
INSTRUMENT ITSELF.

76 Amt

**AFFIDAVIT OF MAILING NOTICE OF SALE
OF TRUST DEED FORECLOSURE**

STATE OF OREGON, County of Deschutes) ss:

I, John A. Berge, being first duly sworn, depose and say:

That I am the Successor Trustee under a Trust Deed between C Corp, Inc., as Grantor, and Running Y Resort, Inc., as Beneficiary, recorded August 11, 2004, in Volume M04 at page 52791-804, Microfilm Records, Klamath County, Oregon, and covering the property described in the attached **NOTICE OF SALE**.

I hereby certify that I mailed, by first class mail and by certified mail, return receipt requested, a copy of the attached **NOTICE OF SALE** to the persons listed below, on the dates and to the addresses indicated, which were the last addresses known to the Successor Trustee and the Beneficiary, by placing said **NOTICE** in a sealed envelope, with postage fully paid thereon, and depositing the same in the United State Mail:

<u>Person</u>	<u>Address</u>	<u>Date</u>
C Corp, Inc.	c/o Charles L Koon PO Box 638 Redmond, OR 97756	5/26/09 7008 1830 0004 3450 5103
PremierWest Bank	PO Box 40 Medford, OR 97501	5/26/09 7008 1830 0004 3450 5097
WHPacific, Inc.	c/o Corporation Service Co. 285 Liberty St NE Salem, OR 97301	5/26/09 7008 1830 0004 3450 5080
South Valley Bank	PO Box 5210 Klamath Falls, OR 97601	5/26/09 7008 1830 0004 3450 5073
South Valley Bank & Trust	PO Box 5210 Klamath Falls, OR 9760	9/3/09 7008 1830 0004 3450 5493
Andrew C. Brandsness	Brandsness, Brandsness & Rudd, PC 411 Pine St Klamath Falls, OR 97601	9/3/09 7008 1830 0004 3450 5509

(Continued on next page)

14453-005 308.doc

BRYANT, LOVLIE & JARVIS, PC
ATTORNEYS AT LAW, ESTABLISHED 1915

591 SW Mill View Way PO Box 880 Bend, Oregon 97709-0880 (541) 382-4331 fax (541) 389-3386 WWW.BLJLAWYERS.COM

Person Address

Southern Oregon
Credit Service

Date

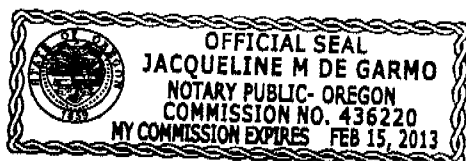
PO Box 4070
Medford, OR 97501-0148

9/3/09

7008 1830 0004 3450 5486


JOHN A. BERGE, OSB 871663

SUBSCRIBED AND SWORN TO before me this 24th day of September, 2009, by
John A. Berge.




NOTARY PUBLIC for Oregon

NOTICE OF SALE

John A. Berge, Successor Trustee under the Trust Deed described below, hereby elects to sell, pursuant to Oregon Revised Statutes Sections 86.705 to 86.795, the real property described below at **10:00 a.m. on October 2, 2009**, at the front steps of the Klamath County Courthouse, 316 Main Street, Klamath Falls, Oregon.

All obligations of performance which are secured by the Trust Deed hereinafter described are in default for reasons set forth below and the beneficiary declares all sums due under the note secured by the trust deed described herein immediately due and payable.

GRANTOR: **C Corp, Inc.**
An Oregon corporation

BENEFICIARY: **Running Y Resort, Inc.**
An Oregon corporation

TRUST DEED RECORDED: August 11, 2004, at Volume M04, Page 52791-804, in the Microfilm Records of Klamath County, Oregon.

PROPERTY COVERED BY TRUST DEED: Lot 1100 within the plat of Tract 1422, Ranchview Estates recorded October 16, 2003 in the office of the County Recorder, Klamath County, Oregon.

DEFAULT: Failure to pay:

1. Lot Price in the amount of **\$48,000.00**;
2. Real Property Taxes in the amount of **\$619.48**;
3. Homeowners' Association Dues in the total amount of **\$1,474.80**;
4. Other – Trustee's Sale Guarantee: **\$292.00**.

SUM OWING ON OBLIGATION SECURED BY TRUST DEED: Principal balance of **\$48,000.00** with interest at **10 percent per annum from July 27, 2006, the maturity date**, until paid.

Notice is given that any person named pursuant to Section 86.753, Oregon Revised Statutes, has the right to have the foreclosure proceeding dismissed and the trust deed reinstated by curing the above-described defaults, by payment of the entire amount due (other than such portions of principal as would not then be due had no default occurred), and by paying all costs and expenses actually incurred in enforcing the obligation and trust deed, together with trustee's and attorney's fees, at any time prior to five days before the date last set for the sale.

JOHN A. BERGE, Successor Trustee

14453-005 306.doc

BRYANT, LOVLIE & JARVIS, PC
ATTORNEYS AT LAW, ESTABLISHED 1915

591 SW Mill View Way PO Box 880 Bend, Oregon 97709-0880 (541) 382-4331 fax (541) 389-3386 WWW.BLJLAWYERS.COM

7008 1830 0004 3450 5103

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54


Postmark
Here

Sent To
C Corp, Inc., c/o Charles L. Koon
 Street, Apt. No.,
 or PO Box No. **PO Box 638**
 City, State, ZIP+4[®]
Redmond OR 97756
 PS Form 3800, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION

is 1, 2, and 3. Also complete
 ted Delivery is desired.
 a and address on the reverse
 return the card to you.
 d to the back of the mailpiece,
 if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  ☐ Agent
☐ Addressee

B. Received by (Printed Name)
Penny Mosher

C. Date of Delivery
5-27-07

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

1. Article Addressed to:

C. Corp, Inc.
c/o Charles L. Koon
PO Box 638
Redmond OR 97756

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

7008 1830 0004 3450 5103

PS Form 3811, February 2004

Domestic Return Receipt **14453-005/JB**

102595-02-M-1540

7008 1830 0004 3450 5097

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Here

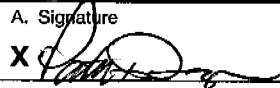
Sent To
Premier West Bank
 Street, Apt. No.,
 or PO Box No. **PO Box 40**
 City, State, ZIP+4[®]
Medford OR 97501
 PS Form 3800, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION

is 1, 2, and 3. Also complete
 icted Delivery is desired.
 ie and address on the reverse
 i return the card to you.
 d to the back of the mailpiece,
 if space permits.

d to:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  ☒ Agent
☐ Addressee

B. Received by (Printed Name)
P. OUGAN

C. Date of Delivery
5-28-07

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 Numl
 (Transfer fro)

7008 1830 0004 3450 5097

PS Form 3811, February 2004

Domestic Return Receipt **14453-005/JB**

102595-02-M-1540

BRYANT, LOVLIE & JARVIS, PC
 ATTORNEYS AT LAW, ESTABLISHED 1915

591 SW Mill View Way PO Box 880 Bend, Oregon 97709-0880 (541) 382-4331 fax (541) 389-3386 WWW.BLJLAWYERS.COM

7008 1830 0004 3450 5080

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Here

Sent To
 WHPacific Inc., c/o Corporation Service Co.
 Street, Apt. No.,
 or PO Box No. 285 Liberty St NE
 City, State, ZIP+4
 Salem OR 97301

PS Form 3800, August 2006

See Reverse for Instructions

COMPLETE THIS SECTION

1, 2, and 3. Also complete
 ct Delivery is desired.
 e and address on the reverse
 return the card to you.
 d to the back of the mailpiece,
 if space permits.

1 to:

WHPacific Inc
 c/o Corporation Service Co.
 285 Liberty St. NE
 Salem OR 97301

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent
☒ Addressee
 B. Received by (Printed Name) *[Name]* C. Date of Delivery *5-29-09*
 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

7008 1830 0004 3450 5073

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54

Postmark
Here

Sent To
 South Valley Bank
 Street, Apt. No.,
 or PO Box No. PO Box 5210
 City, State, ZIP+4
 Klamath Falls OR 97601

PS Form 3800, August 2006

See Reverse for Instructions

COMPLETE THIS SECTION

1, 2, and 3. Also complete
 ted Delivery is desired.
 and address on the reverse
 return the card to you.
 to the back of the mailpiece,
 if space permits.

to:

South Valley Bank
 PO Box 5210
 Klamath Falls OR 97601

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent
☒ Addressee
 B. Received by (Printed Name) *[Name]* C. Date of Delivery *5-29-09*
 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)

7008 1830 0004 3450 5073

PS Form 3811, February 2004

Domestic Return Receipt 14453-005/JB

102595-02-M-1540

BRYANT, LOVLIE & JARVIS, PC
 ATTORNEYS AT LAW, ESTABLISHED 1915

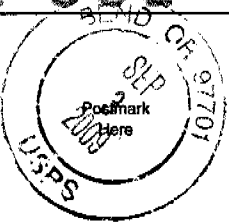
591 SW Mill View Way PO Box 880 Bend, Oregon 97709-0880 (541) 382-4331 fax (541) 389-3386 WWW.BLJLAWYERS.COM

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.15



Sent To
 South Valley Bank Trust
 Street, Apt. No., or PO Box No. PO Box 5210
 City, State, ZIP+4 Klamath Falls OR 97601
 PS Form 3800, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery if desired. Name and address on the reverse can return the card to you. Card to the back of the mailpiece, print if space permits.

Addressed to:

South Valley Bank Trust
 PO Box 5210
 Klamath Falls OR 97601

Certified True Copy

John A. BERGE
 JOHN A. BERGE, OSB 871663
 Attorney for Creditor

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
John A. BERGE
 B. Received by (Printed Name) C. Date of Delivery
John A. BERGE 9-4-09
 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)

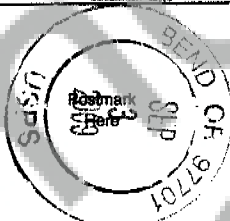
☐ Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.32



Sent To
 Andrew C. Brandoners
 Street, Apt. No., or PO Box No. 411 Pine St
 City, State, ZIP+4 Klamath Falls OR 97601
 PS Form 3800, August 2006 See Reverse for Instructions

2. Article Number

(Transfer from se)

7008 1830 0004 3450 5493

PS Form 3811, February 2004

Domestic Return Receipt 14453-00573B

102595-02-M-1540

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery if desired. Name and address on the reverse can return the card to you. Card to the back of the mailpiece, print if space permits.

Addressed to:

Andrew C. Brandoners
 Brandoners Brandoners
 + Rudd PC
 411 Pine St
 Klamath Falls OR 97601

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
Andrew C. Brandoners
 B. Received by (Printed Name) C. Date of Delivery
Andrew C. Brandoners 9-4-09
 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 se)

7008 1830 0004 3450 5509

PS Form 3811, February 2004

Domestic Return Receipt 14453-00573B

102595-02-M-1540

BRYANT, LOVLIE & JARVIS, PC
 ATTORNEYS AT LAW, ESTABLISHED 1915

591 SW Mill View Way PO Box 880 Bend, Oregon 97709-0880 (541) 382-4331 fax (541) 389-3386 WWW.BJLAWYERS.COM

9845 054E 4000 DEPT 9002

U.S. Postal ServiceTM	
CERTIFIED MAILTM RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.32



Postmark Here

Sent To	
Southern OR Credit Service	
Street, Apt. No.:	PO Box 4070
or PO Box No.	
City, State, ZIP+4	Medford OR 97501-0148

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">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.	<p>A. Signature <i>Tami Freeman</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Tami Freeman</i> C. Date of Delivery <i>9-14-9</i></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>1. Article Addressed to:</p> <p><i>Southern Oregon Credit Serv</i> <i>PO Box 4070</i> <i>Medford OR 97501-0148</i></p>	<p>3. Service Type</p> <p><input checked="" 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>2. Article Numl (Transfer fro)</p> <p><i>7008 1830 0004 3450 5486</i></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004 Domestic Return Receipt 14453-005/JB 102595-02-M-1540

Affidavit of Publication

STATE OF OREGON, COUNTY OF KLAMATH

I, Jeanine P. Day, Business Manager,
being first duly sworn, depose and say
that I am the principal clerk of the
publisher of the Herald and News
a newspaper in general circulation, as
defined by Chapter 193 ORS, printed and
published at Klamath Falls in the
aforesaid county and state; that I know from
my personal knowledge that the

Legal # 11441

Notice of Sale/C.Corp, Inc

a printed copy of which is hereto annexed,
was published in the entire issue of said
newspaper for: (4)
Four

Insertion(s) in the following issues:

July 29, August 5, 12, 19, 2009

Total Cost: \$608.98

Jeanine P Day
Subscribed and sworn by Jeanine P Day
before me on: August 19, 2009

Debra A Grubbe
Notary Public of Oregon

My commission expires May 15, 2012

NOTICE OF SALE

John A. Berge, Successor Trustee under the Trust Deed described below, hereby elects to sell, pursuant to Oregon Revised Statutes Sections 86.705 to 86.795, the real property described below at 10:00 a.m. on October 2, 2009, at the front steps of the Klamath County Courthouse, 316 Main Street, Klamath Falls, Oregon.

All obligations of performance which are secured by the Trust Deed hereinafter described are in default for reasons set forth below and the beneficiary declares all sums due under the note secured by the trust deed described herein immediately due and payable.

GRANTOR: C Corp, Inc.

An Oregon corporation

BENEFICIARY: Running Y Resort, Inc.

An Oregon corporation

TRUST DEED RECORDED: August 11, 2004, at Volume M04, Page 52791-804, in the Microfilm Records of Klamath County, Oregon.

PROPERTY COVERED BY TRUST DEED: Lot 1100 within the plat of Tract 1422, Ranchview Estates recorded October 16, 2003 in the office of the County Recorder, Klamath County, Oregon.

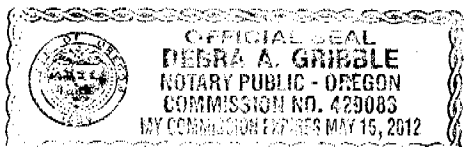
DEFAULT: Failure to pay:

1. Lot Price in the amount of \$48,000.00;
2. Real Property Taxes in the amount of \$619.48;
3. Homeowners' Association Dues in the total amount of \$1,474.80;
4. Other - Trustee's Sale Guarantee: \$292.00.

SUM OWING ON OBLIGATION SECURED BY TRUST DEED: Principal balance of \$48,000.00 with interest at 10 percent per annum from July 27, 2006, the maturity date, until paid.

Notice is given that any person named pursuant to Section 86.753, Oregon Revised Statutes, has the right to have the foreclosure proceeding dismissed and the trust deed reinstated by curing the above-described defaults, by payment of the entire amount due (other than such portions of principal as would not then be due had no default occurred), and by paying all costs and expenses actually incurred in enforcing the obligation and trust deed, together with trustee's and attorney's fees, at any time prior to five days before the date last set for the sale.

JOHN A. BERGE, Successor Trustee
#11441 July 29, August 5, 12, 19, 2009.



EG. NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.



TRUSTEE'S AFFIDAVIT AS TO NON-OCCUPANCY

RE: Trust Deed from

C Corp, Inc.

c/o PO Box 638

Redmond, OR 97756

To

Grantor

AmeriTitle

300 Klamath Ave

Klamath Falls, OR 97601

Trustee

After recording, return to (Name, Address, Zip):

John A. Berge

Bryant, Lovlien & Jarvis, PC

PO Box 880

Bend, OR 97709-0880

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of _____ } ss.

I certify that the within instrument was
received for recording on _____,
at _____ o'clock _____ M., and recorded in
book/reel/volume No. _____ on page _____
and/or as fee/file/instrument/microfilm/reception
No. _____, Records of this County.

Witness my hand and seal of County affixed.

NAME

TITLE

By _____, Deputy.

STATE OF OREGON,

County of Deschutes } ss.

I, John A. Berge

being first duly sworn, depose, say and certify that:

I am the successor

trustee in that certain trust deed executed and delivered by

C Corp, Inc.

, as grantor, to

AmeriTitle

, as trustee,

in favor of Running Y Resort, Inc.

, as beneficiary,

dated July 4, 2004

recorded on August 11, 2004

, in the Records of

Klamath County, Oregon, in ☐ book ☐ reel ☐ volume No. _____ at page _____

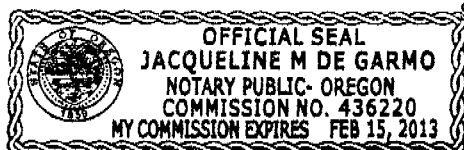
and/or as ☐ fee ☐ file ☐ instrument ☒ microfilm ☐ reception No. M04-52791 (indicate which), covering the following
described real property situated in the above-mentioned county and state, to-wit:

Lot 1100 within the plat of Tract 1422, Ranchview Estates
recorded October 16, 2003 in the office of the County
Recorder, Klamath County, Oregon.

I hereby certify that on September 24, 2009, the above described real property was not occupied.
The word "trustee," as used in this affidavit means any successor trustee to the trustee named in the trust deed described above.

John A. Berge Successor Trustee

SIGNED AND SWORN TO before me on September 24, 2009



Notary Public for Oregon

My commission expires

2/15/2013