After recording return to:

William M. Ganong Attorney at Law 514 Walnut Avenue Klamath Falls, OR 97601 2011-08569 Klamath County, Oregon



07/25/2011 10:21:10 AM

Fee: \$107.00

### AFFIDAVIT OF MAILING TRUSTEE'S NOTICE OF SALE AND DANGER NOTICE

STATE OF OREGON, County of Klamath, ss:

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

I am an employee of William M. Ganong, 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 as Instrument No. 2011-003784 on March 21, 2011 in the Official Records of Klamath County, Oregon.

On March 21, 2011, I deposited with the United States Postal Service at Klamath Falls, Oregon, sealed envelopes containing a Trustee's Notice of Sale executed by William M. Ganong containing the information shown on the Trustee's Notice of Sale attached hereto; the Danger Notice required by Section 20, Chapter 19, Oregon Laws 2008, as modified by 2009 SB628, a copy of which is attached hereto; a Loan Modification Request Form; a Making Home Affordable Program "Request for Modification and Affidavit" ("RMA"); and IRS Form 4506T-EX, copies of which are also attached hereto. I mailed one such envelope by First Class Mail and one such envelope by Registered Mail with Return Receipt Requested, postage prepaid, from Klamath Falls, Oregon to the following named party at the following address:

Kristin J. Pini 24 Rye Court Delaney, Victoria Australia

Said person is the grantor in the trust deed.

The address shown above is the last known address of said party.

Wendy Young Secretary to

William M. Ganong, Successor Trustee

This instrument was acknowledged before me on the 28 day of March, 2011 by Wendy Young.



Notary Public for Oregon

My commission expires:  $\sqrt{0-8-13}$ 

#### TRUSTEE'S NOTICE OF SALE

The Beneficiaries have elected to foreclose the Trust Deed described below pursuant to the provisions of Oregon Revised Statutes 86.705 to 86.795.

- 1. The Trust Deed is described as follows:
  - A. Name of Grantor: Kristin J. Pini
  - B. Name of Trustee: AmeriTitle, an Oregon corporation
  - C. Name of Successor Trustee: William M. Ganong
    Attorney at Law
  - D. Mailing Address of Successor Trustee: 514 Walnut Avenue Klamath Falls OR 97601
  - E. Name of Beneficiary: RVI Properties, Inc., a Nevada corporation
- 2. The legal description of the property covered by the subject Trust Deed is described as:

Lot 48 in Block 26 of FIRST ADDITION TO KLAMATH FOREST ESTATES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Klamath County Assessor's Parcel No. R-3510-023DO-03400-000 and Key No. 265965

- 3. The book and page number of the mortgage records that record the Trust Deed are Book 2006 at Page 016871 of the Official Records of Klamath County, Oregon.
- 4. The defaults for which the foreclosure is made are Grantor's failure to pay monthly installment payments of principal and interest of \$247.12 each, which were due and payable on the 15<sup>th</sup> day of each month commencing on May 15, 2010, and late payment charges of \$24.71 each for the months of May 2010 to February 2011.
- 5. As of the date of this Notice, the sums owing on the obligation secured by the Trust Deed are:

The principal sum of \$3,279.13, with interest on the principal balance at the rate of 7.0% per annum from April 16, 2010 until paid; accrued late charges in the amount of \$247.10 as of February 2011, plus monthly late charges of \$24.71 each beginning March 26, 2011, until paid; \$200 for the foreclosure guarantee; and attorney's fees, trustee's fees, and any other sums due or that become due under the Note or by reason of this foreclosure.

- 6. The real property described in paragraph 2, above, will be sold to satisfy the obligations.
- 7. The Successor Trustee will conduct the sale at 10 a.m. on Tuesday, August 2, 2011 at the TRUSTEE'S NOTICE OF SALE Page 1

front entrance to the office of William M. Ganong, 514 Walnut Avenue, Klamath Falls, Oregon 97601.

8. The right exists under ORS 86.753 to have the proceeding dismissed and the Trust Deed reinstated by paying the entire amount then due, together with costs, trustee's fees, and attorney fees, and by curing any other default complained of in the Notice of Default, at any time that is not later than five days before the date last set for the sale.

Dated this  $\frac{16}{100}$  day of March, 2011.

William M. Ganong, Successor Trustee

Attorney at Law 514 Walnut Avenue Klamath Falls OR 97601

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.

# NOTICE: YOU ARE IN DANGER OF LOSING YOUR PROPERTY IF YOU DO NOT TAKE ACTION IMMEDIATELY

This notice is about your mortgage loan on your property at:

Street address: none – bare lot Lot 48, Block 26 of First Addition to Klamath Forest Estates in Klamath County, Oregon

Your lender has decided to sell this property because the money due on your mortgage loan has not been paid on time or because you have failed to fulfill some other obligation to your lender. This is sometimes called "foreclosure."

The amount you would have had to pay as of March 15, 2011 to bring your mortgage loan current was \$2,965.42. The amount you must now pay to bring your loan current may have increased since that date.

By law, your lender has to provide you with details about the amount you owe, if you ask. You may call 541-882-7228 to find out the exact amount you must pay to bring your mortgage loan current and to get other details about the amount you owe. You may also get these details by sending a request by certified mail to: William M. Ganong, Attorney at Law, 514 Walnut Avenue, Klamath Falls, Oregon 97601.

# THIS IS WHEN AND WHERE YOUR PROPERTY WILL BE SOLD IF YOU DO NOT TAKE ACTION:

Date and Time: Tuesday, August 2, 2011 at 10 a.m.

Place: Front entrance to the office of William M. Ganong, 514 Walnut Avenue, Klamath Falls, Oregon 97601

#### THIS IS WHAT YOU CAN DO TO STOP THE SALE:

- 1. You can pay the amount past due or correct any other default, up to five days before the sale.
- 2. You can refinance or otherwise pay off the loan in full anytime before the sale.

- 3. You can request that your lender give you more time or change the terms of your loan.
- 4. You can sell your real property provided the sales price is enough to pay what you owe.

There are government agencies and nonprofit organizations that can give you information about foreclosure and help you decide what to do. For the name and telephone number of an organization near you, please call the statewide telephone contact number at 800-SAFENET or 800-723-3638. You may also wish to talk to a lawyer. If you need help finding a lawyer, you may call the Oregon State Bar's Lawyer Referral Service at 503-684-3763 or toll-free in Oregon at 800-452-7636 or you may visit its website at: www.osbar.org. Legal assistance may be available if you have a low income and meet federal poverty guidelines. For more information and a directory of legal aid programs, go to <a href="http://www.osbar.org/public/ris/LowCostLegalHelp/LegalAid.html">http://www.osbar.org/public/ris/LowCostLegalHelp/LegalAid.html</a> or <a href="http://www.oregonlawhelp.org">http://www.oregonlawhelp.org</a>.

Your lender may be willing to modify your loan to reduce the interest rate, reduce the monthly payments, or both. You can get information about possible loan modification programs by contacting your lender, RVI Properties, Inc., at 1.800.724.0551. If you cannot reach your lender, you may contact the trustee at the telephone number at the bottom of this notice. If you have already entered into a loan modification with your lender, it is possible that you will not be able to modify your loan again unless your circumstances have changed. Your lender is not obligated to modify your loan.

You may request to meet with your lender to discuss options for modifying your loan. During discussions with your lender, you may have the assistance of a lawyer, a housing counselor, or another person of your choosing. To receive a referral to a housing counselor or other assistance available in your community, call this toll-free consumer mortgage foreclosure information number: 1-800-SAFENET (723-3638) or visit the Oregon Foreclosure Help Web site at http://www.cbs.state.or.us/dfcs/ml/foreclosure/counselors.html. Many lenders participate in new federal loan modification programs. You can obtain more information about these programs at: 1-888-995-HOPE (4673) or by visiting http://www.makinghomeaffordable.gov/.

IF YOU WANT TO APPLY TO MODIFY YOUR LOAN, YOU MUST FILL OUT AND MAIL BACK THE ENCLOSED 'LOAN MODIFICATION REQUEST FORM." YOUR LENDER MUST RECEIVE THE FORM BY APRIL 15, 2011, WHICH IS 30 DAYS AFTER THE DATE SHOWN BELOW.

WARNING: You may get offers from people who tell you they can help you keep your property. You should be careful about those offers. Make sure you understand any papers you are asked to sign. If you have any questions, talk to a lawyer or one of the organizations mentioned above before signing.

Trustee name (print): William M. Ganong, Attorney at Law

Trustee phone number: 541-882-7228
Trustee signature: Date: March 16, 2011

#### LOAN MODIFICATION REQUEST FORM

March 16, 2011

RVI Properties, Inc., Lender 63 Via Pico Plaza #544 San Clemente CA 92672

Return by: April 15, 2011

Dear Ms. Pini:

If you want to apply to modify your loan, you must fill out and mail this form, the attached Making Home Affordable Program "Request for Modification and Affidavit" ("RMA"), and IRS Form 4506T-EZ back. Lender must receive the forms by April 15, 2011, which is not less than 30 days after the date that Lender signed the Residential Foreclosure Notice. Please indicate by checking the applicable line below whether you would like to have your loan modified, whether you would like to meet with Lender, or both:

| <br>I would | like to | have r | ny loan r | nodified |   |
|-------------|---------|--------|-----------|----------|---|
| <br>I would | like to | meet v | with Lene | ier.     | ĺ |

You must send back this form with the completed and signed RMA and IRS Form 4506T-EZ. If you return these forms to the Lender by the date specified above, the Lender or an agent of Lender will review the information you provide and, in good faith, process your request. The Lender or the Lender's agent, as soon as reasonably practicable but not later than 45 days after receiving the forms, will notify you whether the Lender approves or denies the request or requires additional information. During this period, Lender may require additional information to determine whether the loan can be modified.

| Borrower's Signature      | Borrower's Signature      |
|---------------------------|---------------------------|
|                           |                           |
| Borrower's Printed Name   | Borrower's Printed Name   |
| Borrower's Address        | Borrower's Address        |
| City, State, and Zip Code | City, State, and Zip Code |
| Borrower's Email Address  | Borrower's Email Address  |
| Borrower's Phone Number   | Borrower's Phone Number   |

### Making Home Affordable Prog n Request For Modification and Affidavit (RMA)



| A PHEOLOGY OF MODIFICATION AND AFFIL   | AVII (RMA) page I             | COMPLETEALLTI  | HIJ PANESTON                       | THIS FORM     |
|--|-------------------------------|--|------------------------------------|---------------|
| > Loan I.D. Number   | Servi                         | cer  |                                    |               |
| BORROWER Borrower's name   |                               | Co-borrower's name   | ROPRIOVIER                         |               |
| Social Security number   | Date of birth                 | Social Security number   |                                    | Date of birth |
| Home phone number with area code   |                               | Home phone number with are   | ea code                            |               |
| Cell or work number with area code   |                               | Cell or work number with area  | code                               |               |
| I want to:   | ☐ Keep the Property           | Sell the Property  | $\wedge$                           |               |
| The property is my:  | ☐ Primary Residence           | ☐ Second Home  | ☐ Investmer                        | nt            |
| The property is:   | ☐ Owner Occupied              | ☐ Renter Occupied  | ☐ Vacant                           |               |
| Mailing address  |                               |  | 7                                  |               |
| Property address (If same as mailing address   | , just write same)            | (E-  | mail address                       |               |
| Is the property listed for sale?   | □Yes □No  perty? or HOA       | Have you contacted a credit-co If yes, please complete the folic Counselor's Name: Agency Name: Counselor's Phone Number: Counselor's E-mail: Who pays the hazard insuranc I do Lender does IP Is the policy current? IYes Name of Insurance Co.: Insurance Co. Tel #: | e premium for you laid by Condo or | our property? |
| Have you filed for bankruptcy?   Has your bankruptcy been discharged?  |                               |  |                                    |               |
| Additional Liens/Mortgages or Judgments or   | this property:                | . ( )  | 7                                  |               |
| Lien Holder's Name/Servicer  | Balance                       | Contact Numb   | er                                 | Loan Number   |
|  |                               |  |                                    |               |
|  |                               |  |                                    |               |
|  | HARDSHIP                      | AFFIDAVIT  |                                    |               |
| I (We) am/are requesting review under the Making Home Affordable program.  I am having difficulty making my monthly payment because of financial difficulties created by (check all that apply): |                               |  |                                    |               |
| My household income has been reduced. Funderemployment, reduced pay or hours, or death, disability or divorce of a borrower or   | decline in business earnings, | ☐ My monthly debt payments<br>my creditors. Debt includes  |                                    |               |
| ☐ My expenses have increased. For example: reset, high medical or health care costs, uni utilities or property taxes.  |                               | ☐ My cash reserves, including a<br>my current mortgage payme<br>same time.   |                                    |               |
| □ Other:   |                               |  |                                    |               |
| Explanation (continue on back of page 3 if necessary):   |                               |  |                                    |               |

#### INCOME/EXPENSES FOR HOUSEHOLD!

Number of People in Household:

| Monthly Household Income  |    | Monthly Household Expenses/Debt Household Assets                           |    | d Assets   |                          |
|---|----|--|----|--|--------------------------|
| Monthly Gross Wages   | \$ | First Mortgage Payment   | \$ | Checking Account(s)  | \$                       |
| Overtime  | \$ | Second Mortgage Payment  | \$ | Checking Account(s)  | 5                        |
| Child Support / Alimony /<br>Separation <sup>2</sup>                    | \$ | Insurance  | \$ | Savings/ Money Market  | \$                       |
| Social Security/SSDI  | \$ | Property Taxes   | \$ | CDs  | \$                       |
| Other monthly income from<br>pensions, annuities or<br>retirement plans | \$ | Credit Cards / Installment<br>Loan(s) (total minimum<br>payment per month) | \$ | Stocks / Bonds   | \$                       |
| Tips, commissions, bonus and self-employed income                       | \$ | Alimony, child support payments  | \$ | Other Cash on Hand   | \$                       |
| Rents Received  | \$ | Net Rental Expenses  | \$ | Other Real Estate<br>(estimated value)                                     | \$                       |
| Unemployment Income   | \$ | HOA/Condo Fees/Property<br>Maintenance                                     | \$ | Other  | \$                       |
| Food Stamps/Welfare   | \$ | Car Payments   | \$ | Other  | \$                       |
| Other (investment income, royalties, interest, dividends etc.)          | \$ | Other  | 5  | Do not include the value retirement plans when capension funds, annuities, | alculating assets (401k, |
| Total (Gross Income)  | Ş  | Total Debt/Expenses  |    | Total Assets   | <b>\$</b>                |

#### INCOME MUST BE DOCUMENTED

Include combined income and expenses from the borrower and co-borrower (if any). If you include income and expenses from a household member who is not a borrower, please specify using the back of this form if necessary.

<sup>2</sup>You are not required to disclose Child Support. Alimony or Separation Maintenance Income, unless you choose to have it considered by your servicer.

#### INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

| BORROWER   | ☐ I do not wish to furnish this information   |  | CO-BORROWER    | ☐ I do not wish to furnish this information  |
|--|---|--|----------------|--|
| Ethnicity:   | ☐ Hispanic or Latino ☐ Not Hispanic or Latino |  | Ethnicity:     | ☐ Hispanic or Latino<br>☐ Not Hispanic or Latino   |
| Race:  | ☐ Asian<br>☐ Black or Afric                   | dian or Alaska Native<br>an American<br>iian or Other Pacific Islander   | Race; .        | <ul> <li>☐ American Indian or Alaska Native</li> <li>☐ Asian</li> <li>☐ Black or African American</li> <li>☐ Native Hawaiian or Other Pacific Islander</li> <li>☐ White</li> </ul> |
| Sex:   | ☐ Fernale<br>☐ Male                           |  | Sex:           | ☐ Female<br>☐ Male   |
| fo b  This request was taken by:    Face-to-face interview   Mail   Telephone   Internet |   | completed by interviewer Interviewer's Name (print or type) & I Interviewer's Signature Da Interviewer's Phone Number (include | D Number<br>te | Name/Address of Interviewer's Employer   |

#### HEREQUEST FOR MODIFICATION AND AFFI

# IZ (RMA) Page 3 COMELETE ACKNOWLEDGEMENT AND AGREEMENT

THREE PAGES OF THIS FORM

In making this request for consideration under the Making Home Affordable Program, I certify under penalty of perjury:

- 1. That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
- 2. I understand that the Servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements and may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
- 3. I understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
- 4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the Servicer may cancel any Agreement under Making Home Affordable and may pursue foreclosure on my home.
- 5. That: my property is owner-occupied; I intend to reside in this property for the next twelve months; I have not received a condemnation notice; and there has been no change in the ownership of the Property since I signed the documents for the mortgage that I want to modify.
- 6. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner.
- 7. I understand that the Servicer will use the information in this document to evaluate my eligibility for a loan modification or short sale or deed-in-lieu of foreclosure, but the Servicer is not obligated to offer me assistance based solely on the statements in this document.
- 8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
- 9. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of any Making Home Affordable Agreement by Servicer to (a) the U.S. Department of the Treasury, (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any Investor, insurer, guarantor or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with Making Home Affordable; and (e) any HUD-certified housing counselor.

| Þ        |                       |        |       |
|----------|-----------------------|--------|-------|
|          | Borrower Signature    | <br>Da | ite . |
| <b>A</b> |                       |        |       |
|          | Co-Borrower Signature | Da     | ate   |

#### HOMEOWNER'S HOTLINE

If you have questions about this document or the modification process, please call your servicer.

If you have questions about the program that your serVicer cannot answer or need further counseling, you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4673). The Hotline can help with questions about the program and offers free HUD-certified counseling services in English and Spanish.



#### NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including but not limited to misstatement regarding your occupancy in your home, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that:

enforcement authority for investigation and prosecution. By signing this document you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to Lender in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse, mismanagement or misrepresentations affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or www.sigtarp.gov. Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220.

#### Form 4506T-EZ

(Rev. January 2010)

## Short Form Request for Individual Tax Return Transcript

OMB No. 1545-2154

Department of the Treasury Internal Revenue Service ▶ Request may not be processed if the form is incomplete or illegible.

| (ip. Use Fo             | rm 4506T-EZ to order a 1040 series tax return transcript free of c  | harge.  |   |
|-------------------------|---|---|---|
| 1a Name                 | e shown on tax return. If a joint return, enter the name shown  | first. 1b First social securit  | y number on tax return                                      |
| 2a if a jo              | oint return, enter spouse's name shown on tax return.   | 2b Second social sec  | urity number if joint tax return                            |
| 3 Curre                 | nt name, address (including apt., room, or suite no.), city, stat   | te, and ZIP code  |   |
| 4 Previo                | ous address shown on the last return filed if different from line   | 3   |   |
| 5 If the                | transcript is to be mailed to a third party (such as a mortgage<br>as no control over what the third party does with the tax infor  | company), enter the third party's name, ad mation.  | dress, and telephone number. The                            |
|                         | I party name  | Telephone number  |   |
| Addr                    | ress (including apt., room, or suite no.), city, state, and ZIP co  | de  |   |
|                         | ar(s) requested. Enter the year(s) of the return transcript you business days.  | are requesting (for example, "2008"). Mos   | t requests will be processed within                         |
| filled in line          | I the transcript is being mailed to a third party, ensure that you 6. Completing these steps helps to protect your privacy.  If IRS is unable to focate a return that matches the taxpayer ided, the IRS may notify you or the third party that it was unable | entity information provided above, or if IRS  | records indicate that the return has                        |
| Signature<br>husband or | of taxpayer(s). I declare that I am the taxpayer whose name I<br>r wife must sign. Note. For transcripts being sent to a third pa   | s shown on either line 1a or 2a. If the reque<br>rty, this form must be received within 120 d | st applies to a joint return, either ays of signature date. |
|                         |   |   | Telephone number of taxpayer on line 1a or 2a               |
| Sign<br>Here            | Signature (see instructions)  | Date  |   |
| . ]                     | Spouse's signature  | Date  |   |
| Ear Driver              | Act and Panerwork Reduction Act Notice, see page 2.   | Cat. No. 54185S   | Form 4506T-EZ (Rev. 01-2010)                                |

Furnose of form, Individuals can use Form 4506T-EZ to request a tax return transcript that includes most lines of the original tax return. The tax return transcript will not show payments, penalty assessments, or adjustments made to the originally filed return. You can also designate a third party (such as a mortgage company) to receive a transcript on line 5. Form 4506T-EZ cannot be used by taxpayers who file Form 1040 based on a fiscal tax year (that is, a tax year beginning in one calendar year and ending in the following year). Taxpayers using a fiscal tax year must file Form 4506-T, Request for Transcript of Tax Return, to request a return transcript.

Use Form 4506-T to request the following.

- A transcript of a business return (including estate and trust returns).
- An account transcript (contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed).
- A record of account, which is a combination of line item information and later adjustments to the account.
- A verification of nonfiling, which is proof from the IRS that you did not file a return for the year.
- A Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.

Form 4506-T can also be used for requesting tax return transcripts.

Automated transcript request. You can call 1-800-829-1040 to order a tax return transcript through the automated self-help system. You cannot have a transcript sent to a third party through the automated system.

Where to file. Mall or fax Form 4506T-EZ to the address below for the state you lived in when that return was filed.

If you are requesting more than one transcript or other product and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return.

| If you filed an<br>individual return<br>and lived in:   | Mail or fax to the<br>"Internal Revenue<br>Service" at:                         |
|---|---|
| Florida, Georgia,<br>North Carolina,<br>South Carolina  | RAIVS Team<br>P.O. Box 47-421<br>Stop 91<br>Doraville, GA 30362<br>770-455-2335 |
| Alabama, Kentucky,<br>Louisiana,<br>Mississippi,<br>Tennessee, Texas, a<br>foreign country, or<br>A.P.O. or F.P.O.<br>address   | RAIVS Team<br>Stop 6716 AUSC<br>Austin, TX 73301<br>512-460-2272                |
| Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming | RAIVS Team<br>Stop 37106<br>Fresno, CA 93868<br>559-456-5876                    |
| Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia                              | RAIVS Team<br>Stop 6705 P-6<br>Kansas City, MO<br>64999<br>816-292-6102         |
| Cianatura and data  | Form 4506T-F7 must  |

Signature and date. Form 4506T-EZ must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506T-EZ within 120 days of the date signed by the taxpayer or it will be rejected.

Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506T-EZ exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. Sections 6103 and 6109 require you to provide this information, including your SSN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent Information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506T-EZ will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 9 min.; Preparing the form, 18 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506T-EZ simpler, we would be happy to hear from you. You can write to the internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see Where to file on this page.

#### AFTER RECORDING, RETURN TO:

William M. Ganong Attorney at Law 514 Walnut Avenue Klamath Falls OR 97601

#### AFFIDAVIT OF NON-OCCUPANCY NON-JUDICIAL TRUST DEED FORECLOSURE

STATE OF OREGON, County of Klamath) ss.

I, William M. Ganong, being first duly sworn, depose, say, and certify that:

I am the successor trustee in that certain trust deed executed and delivered by Kristin J. Pini, as Grantor, to AmeriTitle, an Oregon Corporation, trustee, in favor of RVI Properties, Inc., a Nevada corporation, as beneficiary, dated June 29, 2006, recorded on August 22, 2006 in the records of Klamath County, Oregon in Book 2006 at page 016871, covering the following-described real property situated in the above-mentioned county and state, to-wit:

Lot 48 in Block 26 of FIRST ADDITION TO KLAMATH FOREST ESTATES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Klamath County Assessor's Parcel No. R-3510-023DO-03400-000 and Key No. 265965

On March 21, 2011, I commenced the foreclosure of the above-referenced Trust Deed by recording a Trustee's Notice of Default and Election to Sell in the office of the Clerk of Klamath County, Oregon in Book 2011 at page 003784. As of the commencement of said foreclosure, the above-described real property was not occupied.

Dated this 22 day of July, 2011

William M. Ganong, Successor Trustee

SIGNED AND SWORN to before me this 22 day of July, 2011 by William M. Ganong, Successor Trustee.

Notary Public for Oregon

My Commission Expires: 8.31.201



AFTER RECORDING, RETURN TO: William M. Ganong Attorney at Law 514 Walnut Avenue Klamath Falls OR 97601

### AFFIDAVIT OF PUBLICATION STATE OF OREGON, COUNTY OF KLAMÁTH

I. Jeanine P. Day, Finance Director, being duly sworn, depose and say that I am the principle 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#13459 SALE PINI TRUSTEE'S NOTICE OF SALE a printed copy of which is hereto annexed, was published in the entire issue of said newspaper for: 4

Insertion(s) in the following issues: 06/02/2011 06/09/2011 06/16/2011 06/23/2011

Total Cost: \$695.84

Subscribed and sworn by Jeanine P Day before me on:

day of July in the year of 2011

Notary Public of Oregon

My commision expires on May 15, 2012



#### TRUSTEE'S NOTICE OF SALE

The Beneficiary has elected to foreclose the Trust Deed described below pursuant to the provisions of Oregon Revised Statutes 86.705 to 86.795.

- The Trust Deed is described as follows:
   A. Name of Grantor: Kristin J. Pini
   B. Name of the Trustee: Amen'Title, an Oregon corporation
   C. Name of Successor Trustee: William M. Ganong, Attorney
- D. Mailing Address of Successor Trustee: 514 Walnut Avenue, Klamath Falls, OR 97601

Name of Beneficiary: RVI Properties, Inc., a Nevada cor-

The legal description of the property covered by the subject Trust Deed is described as follows:
-Lot 4-- Felock 26 of Fires 1-ACC1110N

EST ESTATES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. Idamath County Assessor's Parcel No. R-3510-023DO-03400-000 and Key No. 265965

The book and page number of the mortgage records that record the Trust Deed are: Book 2006 at Page 016871 of the Mortgage Records of the County Clerk of Klamath County,

Oregon.
4. The defaults for which the foreclosure is made are Oregon.

4. The defaults for which the foreclosure is made are Grantors' failure to pay monthly installment payments of principal and interest of \$247.12 each, which were due and payable on the 15th day of each month commencing on May 15, 2010, and late payment charges of \$24.71 each for the months of May 2010 to February 2011.

5. As of the date of this Notice, the sums owing on the obligation secured by the Trust Deed are:

The principal sum of \$3,279.13, with interest on the principal

The principal sum of \$3,279.13, with interest on the principal balance at the rate of 7.0% per annum from April 16, 2010 until paid; accrued late charges in the amount of \$247.10 as of February 2011, plus monthly late charges of \$24.71 each beginning March 26, 2011, until paid; \$200 for the foreclosure guarantee; and attorney's fees, trustee's fees, and any other sums due or that become due under the Note or by reason of this foreclosure.

6. The real property described above will be sold to satisfy

the obligations.

7. The Successor Trustee will conduct the sale at 10 a.m. on Tuesday, August 2, 2011 at the front entrance to the office of William M. Ganong, 514 Walnut Avenue, Klamath Falls, Ore-

gon 97601. 8. The right exists under ORS 86.753 to have the proceeding dismissed and the Trust Deed reinstated by paying the entire amount then due, together with costs, trustee's fees, and attomey fees, and by curing any other default complained of in the Notice of Default, at any time that is not later trian five days before the date last set for the sale.

Dated this 16th day of March, 2011.

/s/William M. Ganong, Successor Trustee, Attorney at Law 514 Walnut Avenue, Klamath Falls OR 97601, 541-882-7228 #13459 June 02, 09, 16, 23, 2011.