2011-013070 Klamath County, Oregon



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# **RECORDING COVER SHEET**

**ALL TRANSACTIONS, ORS: 205.234** 

This cover sheet has been prepared by the person Presenting the attached instrument for recording. Any errors in this cover sheet DO NOT affect the Transaction(s) contained in the instrument itself.

**OREGON - SHORT FORM OPEN-END SECURITY INSTRUMENT** 

HCWF#1018v1 (05/22/10)

11/23/2011 10:35:47 AM

Fee: \$57.00

THIS	SPACE RESERVED	FOR
	COUNTY PECOPOIN	C USE OM

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er recording, return recording	
rmation to: 2011 09300 795	
erican Title, Inc.	
Box 641010	PRINT or TYPE ALL INFORMATION
naha, NE 68164-1010	TRIVI OF THE ADD INFORMATION
date of this Short Form Line of Credit Deed of Trust ("Sec	curity Instrument") is OCTOBER 26, 2011
NAME(S) OF THE TRANSACTION(S) required by hort Form Line of Credit Deed of Trust	ORS 205.234(a)
DIRECT PARTY / GRANTOR, required by ORS 20:	5.125(1)(b) and ORS 205.160
JOSEPH HUNSTIGER	BEATRICE HUNSTIGER
	<del> </del>
······································	
3) INDIRECT PARTY / GRANTEE, required by	ORS 205.125(1)(b) and ORS 205.160
	ORS 205.125(1)(b) and ORS 205.160
Wells Fargo Bank, N.A., as Beneficiary also	ORS 205.125(1)(b) and ORS 205.160
	ORS 205.125(1)(b) and ORS 205.160
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS	ORS 205.125(1)(b) and ORS 205.160  Ialized Services, PO Box 31557 Billings, MT 59107
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS	alized Services, PO Box 31557 Billings, MT 59107
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS  Wells Fargo Financial National Bank, c/o Speci  5) All TAX STATEMENTS SHALL BE SEN	lalized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS:
Wells Fargo Bank, N.A., as Beneficiary also 4) TRUSTEE NAME and ADDRESS Wells Fargo Financial National Bank, c/o Speci	ialized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS: KLAMATH FALLS, OREGON 97601-1260
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS  Wells Fargo Financial National Bank, c/o Speci 5) All TAX STATEMENTS SHALL BE SEN  JOSEPH HUNSTIGER, 820 WOCUS ST,	ialized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS: KLAMATH FALLS, OREGON 97601-1260
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS  Wells Fargo Financial National Bank, c/o Speci 5) All TAX STATEMENTS SHALL BE SEN  JOSEPH HUNSTIGER, 820 WOCUS ST,  6) TRUE and ACTUAL CONSIDERATION (if an \$72,000.00	lalized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS: KLAMATH FALLS, OREGON 97601-1260 y), ORS 93.030
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS  Wells Fargo Financial National Bank, c/o Speci  5) All TAX STATEMENTS SHALL BE SEN  JOSEPH HUNSTIGER, 820 WOCUS ST,  6) TRUE and ACTUAL CONSIDERATION (if an \$72,000.00  7) FULL OR PARTIAL SATISFACTION ORDINECORDS, ORS 205.121(1)(e)  8) THE AMOUNT OF THE CIVIL PENALTY of	ialized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS:  KLAMATH FALLS, OREGON 97601-1260  y), ORS 93.030  ER or WARRANT FILED IN THE COUNTY CLERKS LIEN
Wells Fargo Bank, N.A., as Beneficiary also  4) TRUSTEE NAME and ADDRESS  Wells Fargo Financial National Bank, c/o Speci 5) All TAX STATEMENTS SHALL BE SEN  JOSEPH HUNSTIGER, 820 WOCUS ST, 6) TRUE and ACTUAL CONSIDERATION (if an \$72,000.00  7) FULL OR PARTIAL SATISFACTION ORDINECORDS, ORS 205.121(1)(e)  8) THE AMOUNT OF THE CIVIL PENALTY of OTHER CHARGES FOR WHICH THE WOOTHER CHARGES FOR WHICH THE WOOTHER CHARGES STOR WHICH THE WOOTHER CHARGES TOR WHIC	lalized Services, PO Box 31557 Billings, MT 59107 T TO THE FOLLOWING ADDRESS: KLAMATH FALLS, OREGON 97601-1260

Until a change is requested, all tax statements shall be sent to the following address: JOSEPH HUNSTIGER 820 WOCUS ST KLAMATH FALLS, OREGON 97601-1260

Prepared by:

Wells Fargo Bank, N.A.
BETTY J STEVICK, DOCUMENT PREPARATION
11601 N. Black Canyon Hwy
Phoenix, ARIZONA 85029
866-537-8489

Return Address:

Wells Fargo Bank, N.A. Attn: Document Mgt. P.O. Box 31557 MAC B6955-013 Billings, MT 59107-9900

TAX ACCOUNT NUMBER R435666

## [Space Above This Line For Recording Data]

## SHORT FORM LINE OF CREDIT TRUST DEED

REFERENCE #: 20112597700146

Account number: 682-682-0629405-1XXX

### **DEFINITIONS**

Words used in multiple sections of this document are defined below. The Master Form Trust Deed includes other defined words and rules regarding the usage of words used in this document.

- (A) "Security Instrument" means this document, which is dated OCTOBER 26, 2011, together with all Riders to this document.
- (B) "Borrower" is JOSEPH HUNSTIGER AND BEATRICE HUNSTIGER, AS TENANTS BY THE ENTIRETY, HUSBAND AND WIFE. Borrower is the trustor under this Security Instrument.
- (C) "Lender" is Wells Fargo Bank, N.A., as Beneficiary also Lender is a national bank organized and existing under the laws of the United States. Lender's address is 101 North Phillips Avenue, Sioux Falls, SD 57104.
- (D) "Trustee" is Wells Fargo Financial National Bank, c/o Specialized Services, PO Box 31557 Billings, MT 59107.

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(E) "Debt Instrument" means the loan OCTOBER 26, 2011. The Debt Instrume that may vary from time to time up to a name of TWO THOUSAND AND 00/100THS Details debt in Periodic Payments and to payments and to payments and to payments. (F) "Property" means the property that Property."  (G) "Loan" means all amounts owed now principal, interest, any prepayment charge instrument, and also all sums due under this (H) "Riders" means all Riders to this Section are to be executed by Borrower [check box	ent states that Borrower maximum principal sum pollars (U.S. \$72,000.00 pay the debt in full not is described below up or hereafter under the ges, late charges and as Security Instrument, pourity Instrument that ar	owes Lender, or may on outstanding at any on plus interest. Borrow of later than seven (7 ander the heading "Transled Debt Instrument, include the fees and charge plus interest.	te time of, SEVENTY- er has promised to pay calendar days after ansfer of Rights in the ading without limitation and the design of the design	
N/A Leasehold Rider				
N/A Third Party Rider				
N/A Other(s) [specify]		N/A		
recorded on August 02, 2007, as Instrument the Office of the Recorder of Klamath Cortan TRANSFER OF RIGHTS IN THE PROPERTIES Security Instrument secure renewals, extensions and modifications of when no indebtedness is currently secured covenants and agreements under this Security revocably grants and conveys to Trustee in the	unty, State of Oregon.  ERTY  es to Lender: (i) the ref the Debt Instrument, il by this Security Instructivity Instrument and the	payment of the Loan, including any future aument; and (ii) the periode Debt Instrument. For sale, the following de	and all future advances, dvances made at a time formance of Borrower's this purpose, Borrower scribed property located	
County	of	Klamath	:	
[Type of Recording Jurisdiction]  THE FOLLOWING DESCRIBED REAL PROPERTY IN THE COUNTY OF KLAMATH AND STATE OF OREGON FREE OF ENCUMBRANCES EXCEPT AS SPECIFICALLY SET FORTH HEREIN: SOUTHWESTERLY 15 FEET OF LOT 2 AND ALL OF LOT 3 IN BLOCK 4, BUENA VISTA ADDITION TO THE CITY OF KLAMATH FALLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK, KLAMATH COUNTY, OREGON.  which currently has the address of  820 WOCUS STREET  [Street]  KLAMATH FALLS  Oregon  97601 ("Property Address"):				
KLAMATH FALLS	, Oregon	97601	( rroperty Address"):	

TOGETHER WITH all the improvements now or hereafter erected on the property, and all easements, appurtenances, and fixtures now or hereafter a part of the property. All replacements and additions shall also be covered by this Security Instrument. All of the foregoing is referred to in this Security Instrument as the "Property." The Property shall also include any additional property described in Section 20 of the Master Form Trust Deed.

[Zip Code]

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BORROWER COVENANTS that Borrower is lawfully seised of the estate hereby conveyed and has the right to grant and convey the Property and that the Property is unencumbered, except for encumbrances of record as of the execution date of this Security Instrument. Borrower warrants and will defend generally the title to the Property against all claims and demands, subject to any encumbrances of record.

### MASTER FORM TRUST DEED

By the execution and delivery of this Security Instrument, Borrower agrees that all of the provisions of the Master Form Trust Deed are hereby incorporated in their entirety into this Security Instrument. Borrower agrees to be bound by and to perform all of the covenants and agreements in the Master Form Trust Deed. A copy of the Master Form Trust Deed has been provided to Borrower.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and covenants contained in this Security Instrument and in any Rider executed by Borrower and recorded with it. Borrower also acknowledges receipt of a copy of this document and a copy of the Master Form Trust Deed.

JOSEPH/HUNSTIGER

-Borrower

BEATRICE HUNSTIGER

-Borrower

For An Individual Acting In His/Her Own Right:	
State of Oregon	)
County of Klamath	
This instrument was acknowledge Joseph Hunstige and B	d before me on October 26th, 2011 eatrice Hunstige (date) by  (name(s) of person(s))
OFFICIAL SEAL  VICTOR ALEJANDRO GARCIA PENA  NOTARY PUBLIC - OREGON  COMMISSION NO. 435290  MY COMMISSION EXPIRES DECEMBER 28, 2012	The algundo Sun Pena
(Seal, if any)	(Signature of notarial officer)  Notary Public  Title (and Rank)
	Thie (und rains)

My commission expires: December 28,2012