MC 95749 After recording, return to:

Brandsness, Brandsness & Rudd, P.C. 411 Pine Street Klamath Falls, OR 97601

2012-013217

Klamath County, Oregon

11/29/2012 11:18:40 AM

Fee: \$37.00

STATE OF OREGON FORECLOSURE AVOIDANCE MEDIATION PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

	Lender/Beneficiary:	Michael Thompson and Letitia Thompson
1859	Jurisdiction*	
*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.		
I, <u>Michael Thompson and Letitia</u> (printed name) being first duly sworn, depose, and state that:		
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon		
Laws 2012, chapter 112, §2(2)(d) and to a county clerk in the State of Oregon under Oregon Laws 2012, chapter		
112, §4(3). This exemption affidavit is being submitted: [check only one of the following boxes]		
At the time that a notice of default was filed under ORS 86.735 in Klamath County;		
Ч]	No later than January 31,	20 to claim the exemption for calendar year,
 The Lender/Beneficiary identified above is qualified for the exemptions specified in the above provisions because: [check only one of the following boxes] The Lender/Beneficiary is an individual; 		
		s a financial institution as defined in ORS 706.008;
The Lender/Beneficiary is a mortgage banker as defined in ORS 86A.100; or I The Lender/Beneficiary is a licensee as defined in ORS 725.010.		
2. The above named individual or entity did not commence or cause an affiliate or agent of the individual or entity to commence more than a total of 250 actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or a residential mortgage by suit under ORS 88.010 during the calendar year preceding the date of this affidavit. The undersigned further certifies that she/he: [check only one of the following boxes]		
only one of the following boxes]		
,,	is the	[insert title] of the entity claiming
exem	otion from requirements e	established under Or Laws 2012, th 112 and is authorized by such entity to
	te this affidavit on its beh	
		Michael Onem
		(Signature) Michael Thompson
State of Was	hington	1 2 2 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2
) ss.	Letitia Thompson
County of <u>lefferson</u>		
Signed and sworn to (or affirmed) before me this day of october, 2012		
by <u>Michael Thompson and Letitia Thompson</u> .		
Shandh Bul		
SH	ARON M. BILL	Notary Public for <u>Washington</u>
INO	TARY PUBLIC	My commission expires: 3-19-20/3
COI	TE OF WASHINGTON MISSION EXPIRES	Form 2:2:d V8/13/12