18 2212379

AFTER RECORDING, RETURN TO: Northwest Trustee Services, Inc. PO Box 997 Bellevue, WA 98006-0997

Grantor:

2014-006281

Klamath County, Oregon 06/13/2014 12:19:13 PM

Fee: \$47.00

AFFIDAVIT OF COMPLIANCE With Oregon Laws 2013, chapter 304, section 9

James M Gavin

Beneficiary:	Lakeview Loan Servicing, LLC		
Trustee:	Northwest Trustee Services, Inc.		
Property Address:	4690 Crosby Avenue, Klamath Falls, OR 97603		
Instrument Recording No. :	Vol:M04 Pg:12494		
I, the undersigned, being duly sworn, hereby depose and say that:			
(1) I am the <u>Vice Pro</u>			
the beneficiary of the above referenced residential trust deed:			
2(1)(b)	is exempt pursuant to Oregon Laws 2013, chapter 304, section 2(1)(b)(A) from participation in resolution conferences with		
grantors as required by Oregon Laws 2013, chapter 304, section 2(1)(a). A copy of the affidavit of exemption under Oregon Laws			
2013, chapter 304, section 2(1)(b)(A) is on file with the Oregon			
	ey General; or		
[] particij above.	pated in the resolution conferences process referenced		
(2) The beneficiary has determined that the grantor(s) of the residential trust deed			
is/are: [] not eligible for a foreclosure avoidance measure; or			
	t complied with the terms of a foreclosure avoidance re to which the grantor(s) has/have agreed; or		
has not	t requested a foreclosure avoidance measure		
[] The be the bas granton after m	The beneficiary mailed written notice, in plain language explaining the basis for the beneficiary s determination above, to the grantor(s) and to the Oregon Department of Justice within 10 days after making the determination as required by Oregon Laws 2013, chapter 304, section 9(1)(a) and (b); or		
The bo	rrower did not request a foreclosure avoidance measure		

NWTS# 7699.20755

32.D

(4)	By reason of the above, the beneficiary has complied with the requirements of Oregon Laws 2013, chapter 304, section 9.		
	· -	Clavi Marcinal	
	·	(Signature)	
		Carrie Marcianik	
	-	Vice President	
	•	(Printed Name)	
		• ()	
State of Ne			
County of _)ss. 		
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146	h. Tue o oo W.	A STATE OF THE STATE OF	
On the 4th day of June of year 20 14 before me, the undersigned, a Notary Public in and for said State, personally appeared Carrie Mariana, personally known to			
	ed to me on the basis of satisfactory evide ed to the within instrument and acknowled		
in his capacity, and that by his signature on this instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.			
upon ocnan		Λ	
	74	wole M. Michtosh	
	Notary 1		
	My com	nmission expires: 2/21/2016	
- %	and the second		
- 1	Nicole M McInto 01MC6256195		
٦.	Notary Public, State of I	New York	
	Qualified in Frie Co	unty 3	
	My commission expires FEBRU	Numty ARY 21st, 20_16	
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		W. Kes	