

2014-009120

Klamath County, Oregon



00158179201400091200020029

09/03/2014 09:18:09 AM

Fee: \$47.00

WRIGHT-PATT CREDIT UNION
3560 PENTAGON BLVD STE. 301
BEAVERCREEK, OH 45434

This form was prepared by Connie Daniels-White, myCUMortgage, LLC., 3560 Pentagon Blvd. Suite 301, Beavercreek, OH 45431-1706, telephone # 937-912-7000. Loan # 50619212.

ASSIGNMENT OF DEED OF TRUST / REAL ESTATE MORTGAGE

For Value Received, the undersigned holder of a Deed of Trust (herein "Assignor") whose address is 3560 Pentagon Blvd. Suite 301, Beavercreek, OH 45431-1706, does hereby grant, sell, assign, transfer and convey, unto the Wright-Patt Credit Union, a Corporation organized and existing under the laws of the United States (herein "Assignee"), whose address is 3560 Pentagon Blvd.; Beavercreek, OH 45431-1706, all beneficial interest under a certain Deed of Trust/Real Estate Mortgage, dated 07/29/2013.

Made and executed by: Rodney A Craig and Carolyn M Craig Husband and Wife

To myCUMortgage, LLC., Trustee, and given to secure payment of **\$165,000.00** which Deed of Trust is of record in Book _____, Volume _____, Or Liber No. _____ at page _____, or as Instrument No. 2013008585 of the Records of Klamath, County State of OR, Tax Parcel No. _____

See Exhibit "A"

The note(s) and obligations therein described, the money due and to become due thereon with interest, all rights accrued or to accrued under such Deed of Trust /Real Estate Mortgage.

TO HAVE AND TO HOLD, the same unto Assignee, its successor and assigns, forever, subject only to the terms and conditions of the above-described Deed of Trust /Real Estate Mortgage.

IN WITNESS WHEREOF, the undersigned Assignor has executed this Assignment of Deed of Trust /Real Estate Mortgage on 8/12/2014.

myCUMortgage, LLC.

State of

Ohio

County of

Greene

By:

Name:

Title:

Janetta Reece
Janetta Reece
Authorized Agent

On 8/12/2014, Janetta Reece, personally known to me (or proved to be on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument appeared before Notary Public as signed below.

Notary

Notary Public in and for the State of
Residing in
My Commission Expires



Chelsea Mohler
Notary Public, State of Ohio
My Commission Expires 02-28-2018

Escrow Officer: STACY HOWARD
Email: stacyh@ameri-title.com
Direct Line: (541) 883-7951

Title Officer: JEAN PHILLIPS
Email: jean@ameri-title.com
Direct Line: (541) 883-7941



ROGUE FEDERAL CREDIT UNION
1370 CENTER DRIVE
MEDFORD, OR 97504

Date: June 3, 2013
Escrow Number: MT98003-SH
Escrow Officer: STACY HOWARD
Title Number: 0098003
Title Officer: JEAN PHILLIPS

cc: RODNEY AND CAROLYN CRAIG
cc: MARK AND GEORGIANA JAHN

PRELIMINARY TITLE REPORT FOR:
CRAIG, RODNEY A. AND CAROLYN M.
32220 RIVERS DRIVE
CHILOQUIN, OREGON 97624

REPORT NO. 1

Policy or Policies to be issued:	<u>Liability</u>	<u>Premium</u>
STANDARD OWNER'S POLICY	\$165,000.00	\$613.00
EXTENDED LENDER'S POLICY	\$165,000.00	\$284.00
OTIRO 209.3-06 - (Restrictions, Encroachments Endorsement)		\$100.00
OTIRO 222-06 - (Location Endorsement)		No Charge
OTIRO 208.1-06 - (Environmental Lien Endorsement)		No Charge
(Government Service Fee \$15.00 per tax lot, per district)		

We are prepared to issue ALTA (6/17/06) title insurance policy (ies) of *Chicago Title Insurance Company* in the usual form and amounts above, insuring the title to the land described as follows:

Parcel 1 of Minor Land Partition 44-90, situated in the SW1/4 of Section 20, Township 35 South, Range 7 East of the Willamette Meridian, Klamath County, Oregon.

And dated as of May 14, 2013 at 8:00 A.M., title is vested in:

**MARK JAHN AND GEORGIANA MARIE JAHN,
AS TENANTS BY THE ENTIRETY**

The estate or interest in the land described or referred to in this Report and covered herein is:

FEE SIMPLE

This report is preliminary to the issuance of title insurance and shall become null and void unless a policy is issued and the full premium therefore paid.

300 Klamath Avenue • PO Box 5017 • Klamath Falls, OR 97601 • 541-883-3401 • Fax 541-882-0620