

WHEN RECORDED, RETURN TO:

iestore to:		
Washington Federal		
5215 S.6th St.		
Klamath Falls OR 97603		
Attn: <u>Heather Tyler</u>		

2014-010067

Klamath County, Oregon 09/29/2014 02:50:45 PM

Fee: \$47.00

AMERITI	TLE ,has recorded this	
Inetrume	nt by request as an accom edatio n	only,
and has	not examined it for requi arity an d 8	บสาดเลกอง
or as to t	ts effect upon the title to any real p	reserty
that may	he described therein.	
that may	be described therein.	

Date 9/24/14

Loan No.415203-9

NOTICE OF MODIFICATION OF DEED OF TRUST

NOTICE TO	ALL PERSONS is given that _	Washington Federal	
	ry/(Grantee) of that Deed of Trus		
recorded under_	Auditor File Number	No. Vo1M05 Page58473	
in the Records o	f <u>Klamath</u>	County, State of Oregon	
has, this date, r	modified the terms of the Note s	secured by the Deed of Trust ("the	Loan Contract and
Security Instrum	ent"), as approved by <u>James</u>	M Yewchuk	
under the Couri	ty Instrument as follows:	, Grantor (or	r Successor Grantor)
under the Securi		4	
Check Appropriate Box(es)	"X" in the box opposite it and w	paragraph, which is highlighted by whose blank lines or spaces are filled d paragraph not so highlighted, is no	l in, is part of
		ct and Security Instrument has been to 10/01/34	changed .
The purpose of to the loan contranner the actual contranner the ac	ge in the Maturity Date. this document is to provide recor- ract and security instrument. It is	d notice, when required, of a modi- s not intended to nor shall it be de- ation agreement between the gran	fication in the terms
			
- 1 C	No. 11		
		that, except for the terms of any	
remain in full for		act and security instrument shall in	n an other respects
Tomani ini iuni ioi	oo und creect.	Grantor(s)	
	_		
WASHINGTO	QN FRÆERAL, N.A.		
(10)			
by:	*WY	- 7/4	
Heather		\mathcal{S}_{I}	
Tiue. Assist	ant Branch Manager		-
	•	/ /	
		-	
			<u> </u>
	(Next page for no	tary acknowledgments)	

(Next page for notary acknowledgments)

Page 1 of 2 pages.

LO122 OR 08/13/13

STATE OF UKLGON)
county of Klamath) ss.
I certify that I know or have satisfa	ctory evidence that James M Yewchuk
	[Nemo(a) of paragraph]
is/are the person(s) who appeared before	[Name(s) of person(s)] ore me, and said person(s) acknowledged that (he/she/they) signed
this instrument and acknowledged it to mentioned in the instrument.	be (his/her/their) free and voluntary act for the uses and purposes
Dated: 9/24/14	(Illathol (S)
	(Signature)
(Seal or Stamp)	Notary Public in and for the State of OROSON residing at 5215 S. Leth St Klamath Falls OR 97100
OFFICIAL SEAL HEATHER R. TYLER NOTARY PUBLIC-OREGON	My commission expires May 31,2065
COMMISSION NO. 458632 MY COMMISSION EXPIRES MAY 31, 2015	
	. ()
,	
STATE OF)
COUNTY OF) ss.)
I certify that I know or have satisfa-	ctory evidence that
 -	
	[Name(s) of person(s)]
is/are the person(s) who appeared before	ore me, and said person(s) acknowledged that (he/she/they) signed
acknowledged it as the	he/she/they) was/were authorized to execute the instrument and
of	(Type of Authority, e.g., Officer, Trustee)
	of the Party on Behalf of Whom the Instrument was Executed)
A 4/	party for the uses and purposes mentioned in the instrument.
Dated:	(Signature)
(Seal or Stamp)	Notary Public in and for the State of,
	residing at
	My commission expires