

**2015-004322****Klamath County, Oregon****05/05/2015 04:00:56 PM****Fee: \$52.00**

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

**AFFIDAVIT OF COMPLIANCE**  
**With ORS 86.748**

<b>Grantor:</b>	<b>Michael Nealy and Glenn Ellen Nealy, as tenants by the entirety</b>
<b>Beneficiary:</b>	<b>Deutsche Bank National Trust Company, as Trustee, in trust for the registered holders of Morgan Stanley ABS Capital I Inc. Trust 2004-HE4, Mortgage Pass-Through Certificates, Series 2004-HE4</b>
<b>Trustee:</b>	<b>Northwest Trustee Services, Inc.</b>
<b>Property Address:</b>	<b>5735 Independence Avenue, Klamath Falls, OR 97603</b>
<b>Instrument Recording No. :</b>	<b>Vol: M04 Page: 11136</b>

I, the undersigned, being duly sworn, hereby depose and say that:

- (1) I am an officer of Select Portfolio Servicing, Inc. ("SPS"), as servicing agent and attorney-in-fact for Deutsche Bank National Trust Company, as Trustee, in trust for the registered holders of Morgan Stanley ABS Capital I Inc. Trust 2004-HE4, Mortgage Pass-Through Certificates, Series 2004-HE4, who is the current beneficiary of the above referenced residential trust deed:
- (2) SPS, on behalf of beneficiary, has determined that the grantor(s) of the residential trust deed:
- ☐ is/are not eligible for a foreclosure avoidance measure; or
  - ☐ did not provide the required documentation for a foreclosure avoidance measure; therefore, the review process was closed and the grantor(s)'s eligibility could not be determined; or
  - ☐ has not complied with the terms of a foreclosure avoidance measure to which the grantor(s) agreed; or
  - ☒ has not requested a foreclosure avoidance measure
- (3) ☒ SPS, on behalf of 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 ORS 86.748.

☐ The grantor(s) did not request a foreclosure avoidance measure

- (4) By reason of the above, the beneficiary has complied with the requirements of ORS 86.748.

By: [Signature] 4/29/15

Name: Jon Korhonen

Title: Document Control Officer  
Select Portfolio Servicing, Inc.

Date: April 29, 2015

STATE OF UTAH )

COUNTY OF SALT LAKE )

Subscribed and sworn to before me on this 29 day of April, in the  
year 2015 by Jon Korhonen Personally Known, a Doc. Control Officer  
of Select Portfolio Servicing, Inc.

[Signature]  
Notary Public

