

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

AFFIDAVIT OF COMPLIANCE
With ORS 86.748

Grantor:	Mark N Wayne, and Marion G Wayne, husband and wife
Beneficiary:	Bank of New York Mellon, f/k/a The Bank of New York, as trustee, on behalf of the holders of the Alternative Loan Trust 2005-51, Mortgage Pass-Through Certificates, Series 2005-51
Trustee:	Northwest Trustee Services, Inc.
Property Address:	4634 Coopers Hawk Road, Klamath Falls, OR 97601
Instrument Recording No. :	M05-63827 Loan Modification Agreement recorded 4/19/2011 as Instrument #2011-004954

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 Bank of New York Mellon, f/k/a The Bank of New York, as trustee, on behalf of the holders of the Alternative Loan Trust 2005-51, Mortgage Pass-Through Certificates, Series 2005-51, 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 after the implementation of ORS 86.748 on August 4, 2013.

(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 after the implementation of ORS 86.748 on August 4, 2013.

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

By: [Signature] 12-1-15
Name: Rebecka Mayoh
Title: Document Control Officer
Select Portfolio Servicing, Inc.
Date: December 1, 2015

STATE OF UTAH)

COUNTY OF SALT LAKE)

Subscribed and sworn to before me on this 1st day of December, in the year 2015 by Rebecka Mayoh *, a Document Control Officer of Select Portfolio Servicing, Inc., proved on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument. Witness my hand and official seal.

* Personally Known

[Signature]
Notary Public

