0019540920160012387003038

11/21/2016 10:22:59 AM   Fee: $52.00

After Recording Return To:
GUILD MORTGAGE COMPANY
ATTN: DMD
5898 COPLEY DRIVE
SAN DIEGO, CA 92111

Until change is requested, all tax statements shall
be sent to the following address:
32671 MAGPIE DR
CHILOQUIN, OR 97624

Tax Account Number: R254236

————————————————————*[Space Above This Line For Recording Data]*————————————————

Loan No.: 809-2000009

OREGON ASSIGNMENT OF DEED OF TRUST

For Value Received, **Guild Mortgage Company, a California Corporation**, the undersigned holder of a Deed of Trust (herein "Assignor"), whose address is **5898 Copley Drive, San Diego, California 92111**, does hereby grant, sell, assign, transfer and convey, unto **Oregon Housing and Community Services Department**, (herein "Assignee"), whose address is **725 Summer Street NE, Suite B, Salem, Oregon 97301**, all beneficial interest under a certain Deed of Trust dated **September 19, 2016**, made and executed by:

JUDITH M BURKIEWICZ AND THOMAS E BURKIEWICZ

to **NORTHWEST TRUSTEE SERVICES, INC.**, ("Trustee"), upon the following described property situated in **KLAMATH** County, State of Oregon:

LOT 3, BLOCK 8 OF TRACT NO 1023, KLAMATH COUNTY, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON. ACCOUNT NO.: R254236.

such Deed of Trust having been given to secure payment of **One Hundred Thirty Five Thousand Seven Hundred Thirty Two and 00/100ths Dollars ($135,732.00)**, which Deed of Trust is of record as No. 2016-010197, in the Office of the County Recorder of Klamath County, State of Oregon, together with the note(s) and obligations therein described, the money due and to become due thereon with interest, and all rights accrued or to accrue under such Deed of Trust.

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

IN WITNESS WHEREOF, the undersigned Assignor has executed this Assignment of Deed of Trust on **September 28, 2016.**

Assignor:
**GUILD MORTGAGE COMPANY,
A CALIFORNIA CORPORATION**

By: _____
J. DIAZ

Its: **ASSISTANT SECRETARY**

ACKNOWLEDGMENT

State of   §
                         §
County of   §

This instrument was acknowledged before me on   by
              SEE ATTACHED   as   of

_____
Signature of Notarial Officer

_____
Printed Name

_____
Title or Rank

(Seal)   My Commission Expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT   CIVIL CODE § 1189

>>>

> A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California   )
County of _____ San Diego _____)

On _September 28, 2016_ before me, ____Doanh Quoc Nguyen, Notary Public____,
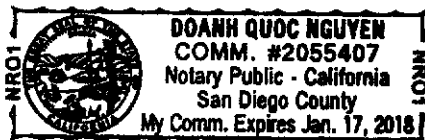   *Date*   *Here Insert Name and Title of the Officer*
personally appeared __J. Diaz, Assistant Secretary of Guild Mortgage Company, a__

__California Corporation__   *Name(s) of Signer(s)*

_____,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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┌─────────────────────────────────┐
│     DOANH QUOC NGUYEN           │
│     COMM. #2055407             │
│  Notary Public · California    │
│     San Diego County           │
│  My Comm. Expires Jan. 17, 2018│
└─────────────────────────────────┘
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I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature ___*Doanh Quoc Nguyen*___
                        Signature of Notary Public

       Place Notary Seal Above
_____ **OPTIONAL** _____
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____   Signer's Name: _____
☐ Corporate Officer — Title(s): _____   ☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General   ☐ Partner — ☐ Limited ☐ General
☐ Individual   ☐ Attorney in Fact   ☐ Individual   ☐ Attorney in Fact
☐ Trustee   ☐ Guardian or Conservator   ☐ Trustee   ☐ Guardian or Conservator
☐ Other: _____   ☐ Other: _____
Signer Is Representing: _____   Signer Is Representing: _____