

AFTER RECORDING, RETURN TO: T.D. SERVICE COMPANY 4000 W. METROPOLITAN DR., STE 400

ORANGE, CA 92868

TS Number: L550364

APN #:

R499623/R-3908-031BO-05500-000

### AFFIDAVIT OF COMPLIANCE with Oregon Laws 2012, chapter 112, section 4a

Grantor:	JOSEPH L. REPOSA AND CHERYL L. REPOSA	
Beneficiary:	UNITED STATES OF AMERICA ACTING THROUGH THE RURAL HOUSING SERVICE, SUCCESSOR IN INTEREST TO FMHA UNITED STATES DEPARTMENT OF AGRICULTURE	
Trustee:	CHRISTOPHER C. DORR, OSBA # 992526, TRUSTEE	
Property Address:	15106 PIONEER ROAD, KLAMATH FALLS OR 97601	
Instrument/Recording No./ Date	BK: M98 PAGE: 28372 / RECORDED 8/03/98	

- I, the undersigned, being duly sworn, hereby depose and say that:
- (1) TD Service Company is agent for the trustee in the above referenced matter.
- (2)I certify that the beneficiary and the trustee as of this date are the beneficiary and trustee named above.
- (3)On the date shown and in the manner described on the attached Declaration and Affidavit of Mailings and in accordance with ORS 86.740, caused to be served on the grantor written notice that explains in plain language that:

The grantor is not eligible for any foreclosure avoidance measure; or

The grantor has not complied with the terms of the foreclosure avoidance measure to which the grantor and beneficiary had agreed;

The lender was unable to make contact with the grantor.

- (4) On the same date, I caused the same notice to be mailed to the Oregon Department of Justice.
- (5) By reason of the above, the beneficiary or beneficiary's agent has complied with the requirements of subsections and (2) of Oregon Laws 2012, chapter 112, section 4a.

Vanessa Varelas

(Printed name of person signing this affidavit)

2017-003383 Klamath County, Oregon

03/31/2017 11:03:00 AM

Fee: \$62.00

TS Number: L550364

APN #:

R499623/R-3908-031BO-05500-000

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	Orange	)S	38

On 3/27/2017 before me, M. PINO, a Notary Public, personally appeared VANESSA VARELAS, who proved to me on the basis of satisfactory evidence to be the person(\$) whose name(\$) sare subscribed to the within instrument and acknowledged to me that he/she they executed the same in his new their authorized capacity(ies), and that by his heir signature(\$) on the instrument the person(\$) or the entity upon behalf of which the person(\$) acted, executed the instrument.

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.

Notary Public in and for said County and State

M. PINO
Notary Public – California
Orange County
Commission # 2183493
My Comm. Expires Mar 13, 2021

Attachment - Proof of Service

(Seal)

#### DECLARATION OF MAILING BY CERTIFIED/REGISTERED MAIL



T.S.# L 550364

JOSEPH L REPOSA 15106 PIONEER ROAD KLAMATH FALLS, OR 97601

CHERYL L REPOSA 15106 PIONEER ROAD KLAMATH FALLS, OR 97601

JOSEPH L REPOSA P.O. BOX 1055 KENO, OR 97627

CHERYL L REPOSA P.O. BOX 1055 KENO, OR 97627

FORECLOSURE AVOIDANCE MEDIATION OREGON DEPARTMENT OF JUSTICE 1162 COURT STREET, NE SALEM, OR 97301-4096

Date: 03/23/17

CERTIFIED 7105 2257 2920 2064 1407 RETURN RECEIPT REQUESTED

CERTIFIED 7105 2257 2920 2064 1414 RETURN RECEIPT REQUESTED

CERTIFIED 7105 2257 2920 2064 1421 RETURN RECEIPT REQUESTED

CERTIFIED 7105 2257 2920 2064 1438 RETURN RECEIPT REQUESTED

CERTIFIED 7105 2257 2920 2064 1445 RETURN RECEIPT REQUESTED

STATE OF CALIFORNIA COUNTY OF ORANGE

The undersigned does hereby declare that he/she is over the age of 18 year and that his/her business address is 4000 W. Metropolitan Drive, Suite 400, Orange, CA 92868. That he/she did cause to be deposited, on the above date, in the United States mail, with postage fully prepaid, mailed by Certified/Registered mail, in a sealed envelope, a copy of the document which is attached to this declaration.

I certify or declare under penalty of perjury that the foregoing is true and correct.

Andrea Gonzalez

## AFFIDAVIT OF MAILING BY FIRST CLASS MAIL





T.S.# L 550364

Date: 03/23/17

STATE OF CALIFORNIA COUNTY OF ORANGE

SS.

The undersigned does hereby declare that he/she is over the age of 18 years and that his/her business address is 4000 W. Metropolitan Drive, Suite 400, Orange, CA 92868. That he/she did cause to be deposited, on the above date, in the United States mail, with postage fully prepaid, mailed by First Class Mail, in a sealed envelope, a copy of the Notice of Default / Notice of Trustee's Sale (Circle)

Addressed to the following:

JOSEPH L REPOSA 15106 PIONEER ROAD KLAMATH FALLS, OR 97601

CHERYL L REPOSA 15106 PIONEER ROAD KLAMATH FALLS, OR 97601

JOSEPH L REPOSA P.O. BOX 1055 KENO, OR 97627

CHERYL L REPOSA P.O. BOX 1055 KENO, OR 97627

FORECLOSURE AVOIDANCE MEDIATION OREGON DEPARTMENT OF JUSTICE 1162 COURT STREET, NE SALEM, OR 97301-4096

I declare under penalty of perjury that the foregoing is true and correct.

Andrea Gonzalez

## FORECLOSURE AVOIDANCE MEASURE NOTICE

# YOU MAY LOSE YOUR PROPERTY IF YOU DO NOT TAKE ACTION IMMEDIATELY

Homeowner/Grantor:	JOSEPH L. REPOSA AND CHERYL L. REPOSA
Lender/Beneficiary:	UNITED STATES OF AMERICA ACTING THROUGH THE
	RURAL HOUSING SERVICE, SUCCESSOR IN INTEREST TO
	FMHA UNITED STATES DEPARTMENT OF AGRICULTURE
Property Address:	15106 PIONEER ROAD, KLAMATH FALLS, OR 97601
Your Lender has	determined that:
M Vou are not	oligible for any forcelesure evoldence managine offered by your lander
The following	eligible for any foreclosure avoidance measure offered by your lender. g foreclosure avoidance measures were considered but you are not
	nem. The basis for the Lender's determination is (must be described
	ity in plain language):
No ve	egranse from the borrower.
	in compliance with the terms of an agreement with your Lender for
	, a temporary or permanent loan modification, a short sale, a deed-in-
	osure, or another foreclosure avoidance measure. The basis for the termination is (must be described with specificity in plain language):
Lender's det	ennination is (must be described with specificity in plain language).
Your property	is currently set for sale on 7/07/17 AT 10:00 AM (time/date) at INSIDE
	OBBY OF THE KLAMATH COUNTY COURTHOUSE, 316 MAIN ST,
KLAMA I H FA	ALLS, OR 97601 (location). If you disagree with your Lender's
determination	, you should seek legal advice immediately.
There are gov	vernment agencies and nonprofit organizations that can give you
information at	bout foreclosure and help you decide what to do for the name and
telephone nur	mber of an organization near you, please call 211 or visit
	omeownersupport.gov. If you need help finding a lawyer, call the
Oregon State	Bar's Lawyer Referral Service online at www.oregonstatebar.org or by
	684-3763 (in the Portland metropolitan area) or toll-free elsewhere in
	00) 452-7636. Free legal assistance may be available if you are very
	For more information and a directory of legal aid programs, go to
www.oregonia	awneip.org.
LINITED STA	TES OF AMERICA ACTING THROUGH THE RURAL HOUSING
	JCCESSOR IN INTEREST TO FMHA UNITED STATES
	IT OF AGRICULTURE

DEPARTMENT OF AGRICULTURE

By: Date: 3-13-17