

2017-005567

Klamath County, Oregon

05/22/2017 09:28:00 AM

Fee: \$52.00

After Recording Return To:
PEIRSONPATTERSON, LLP
ATTN: RECORDING DEPT.
4400 ALPHA ROAD
DALLAS, TX 75244-4505

Until change is requested, all tax statements shall
be sent to the following address:
3415 Vision Drive
Columbus, OH 43219

Tax Account Number: R302639

[Space Above This Line For Recording Data]

Loan No.: 6103407612

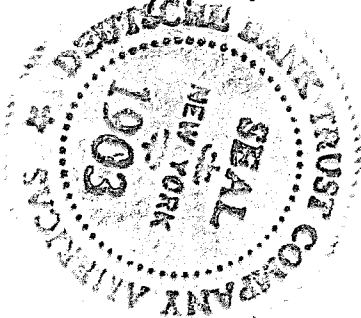
OREGON ASSIGNMENT OF DEED OF TRUST

For Value Received, the undersigned holder of a Deed of Trust **Deutsche Bank Trust Company America's as Trustee, f/k/a Bankers Trust Company, as Trustee**, (herein "Assignor"), does hereby grant, sell, assign, transfer and convey, unto **Residential Funding Corporation**, (herein "Assignee"), whose address is **700 Kansas Lane, MC 8000, Monroe, LA 71203**, all beneficial interest under a certain Deed of Trust dated **September 22, 1998** and recorded on **October 5, 1998**, made and executed by **TREVE A. SEARS AND LEILANI L. SEARS** to **FIRST AMERICAN TITLE INSURANCE COMPANY OF OREGON**, Trustee, upon the following described property situated in **KLAMATH** County, State of Oregon:
Property Address: **1545 SARGENT AVENUE, KLAMATH FALLS, OR 97601**

such Deed of Trust having been given to secure payment of **Thirty Four Thousand Three Hundred and 00/100ths (\$34,300.00)**, which Deed of Trust is of record in Book, Volume, or Liber No. **M98**, at Page **36506** (or as No. **67349**), in the Office of the County Recorder of **KLAMATH** County, State of Oregon.

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 May 9, 2017.



Assignor:

**Deutsche Bank Trust Company America's as Trustee,
f/k/a Bankers Trust Company, as Trustee**

By:

A handwritten signature in black ink, appearing to read "Ronaldo Reyes".

**Ronaldo Reyes
Vice President**

Its:



* 1 - 3 8 2 5 6 7 *



* 6 1 0 3 4 0 7 6 1 2 *

ACKNOWLEDGMENT

State of _____

§
§
§

County of _____

On this _____ day of _____, before me appeared _____, to me personally known, who, being by me duly sworn (or affirmed) did say that he/she is the _____, of **Deutsche Bank Trust Company America's as Trustee, f/k/a Bankers Trust Company, as Trustee**, and that the seal affixed to said instrument is the corporate seal of said entity and that the instrument was signed and sealed on behalf of the said entity by authority of its board of directors and that _____ acknowledged the instrument to be the free act and deed of the said entity.

(Seal)

see attached

Signature of Notarial Officer

Printed Name

Title or Rank

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 Orange)On May 9, 2017 before me, LUZ A. MEDA, Notary Public,
Date Here Insert Name and Title of the Officerpersonally appeared Ronaldo Reyes
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.

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 _____
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 DocumentTitle or Type of Document: OR AJS of DOT Document Date: 5-9-17

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

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

Signer Is Representing: _____

Signer's Name: _____

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

Signer Is Representing: _____