

**RECORDING REQUESTED BY AND
AFTER RECORDING MAIL TO:**

UPF WASHINGTON INCORPORATED
12410 E MIRABEAU PKWY #100
SPOKANE VALLEY, WA 99216
Ref. No. 516907-S(P)(E)

SUBSTITUTION OF TRUSTEE AND DEED OF RECONVEYANCE

Oregon Housing & Community Services Dept., State of Oregon, the undersigned beneficiary, whose address is 725 Summer St NE Ste B, Salem, Oregon 97301, holder of the note secured by a Deed of Trust dated 5/9/2006, executed by Patrick M Heaton and Michelle R Meng, as Grantor(s), to AmeriTitle, as Trustee for Oregon Housing & Community Services Dept., State of Oregon, as beneficiary, which Deed of Trust recorded on 5/16/2006, as Document/Instrument No. M06-09888, Book No. N/A, Page No. N/A, records of Klamath County, Oregon, hereby substitutes BRAD L WILLIAMS, an Oregon attorney, 12410 E Mirabeau Pkwy #100, Spokane Valley, WA 99216, as Substitute Trustee of the above Deed of Trust.

BRAD L WILLIAMS, an Oregon attorney, hereby accepts said appointment as Trustee under above Deed of Trust and as substitute trustee, pursuant to the request of the present Beneficiary and in accordance with the provisions of said Deed of Trust, does hereby reconvey without warranty, to the person or persons legally entitled thereto, all the estate now held by him under above Deed of Trust.

DATED: August 23rd 2017

DATED: 8/30/17

OREGON HOUSING & COMMUNITY
SERVICES DEPT., STATE OF OREGON

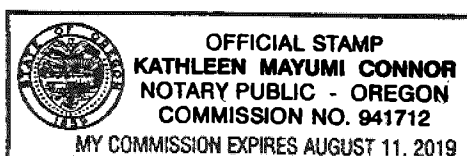
Kim Freeman BY: Brad L. Williams
BY: Kim Freeman, Single Family Housing Manager Brad L. Williams, Substitute Trustee

STATE OF OREGON County of Marion.

**of Oregon Housing and Community Services.*

On August 23rd 2017, before me, the undersigned Notary Public, personally appeared Kim Freeman, Single Family Housing Manager, personally known to me (~~or 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 entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



Kathie Connor
NOTARY PUBLIC in and for the State of Oregon
Printed Name: Kathie Connor
My commission expires: August 11, 2019

STATE OF WASHINGTON COUNTY OF SPOKANE:

On 8-30-17, before me, the undersigned Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared **Brad L. Williams, Successor Trustee**, personally known to me or 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.

WITNESS my hand and official seal.

Notary Public
State of Washington
Debra K. Baumgartner
Commission Expires 06-12-2018

Debra K Baumgartner
NOTARY PUBLIC in and for the State of Washington
Printed Name: **DEBRA K. BAUMGARTNER**
My commission expires: 8/12/18