2018-000291

Klamath County, Oregon

01/08/2018 01:54:01 PM

Fee: \$47.00

RECORDING REQUESTED BY AND AFTER RECORDING MAIL TO:

UPF WASHINGTON INCORPORATED 12410 E MIRABEAU PKWY #100 SPOKANE VALLEY, WA 99216 Ref. No. 524257-S(P)(E)

Janice M Willmening

Commission Expires 02-01-2018

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 8/26/1988, County, Oregon, hereby substitutes BRAD L WILLIAMS, an Oregon attorney, 12410 E Mirabeau Pkwy #100,

executed by Klamath County, a subdivision for the State of Oregon, as Grantor(s), to Aspen Title and Escrow Inc, as Trustee for Oregon Housing & Community Services Dept., State of Oregon, as beneficiary, which Deed of Trust recorded on 8/26/1988, as Document/Instrument No. 90769, Book No. M88, Page No. 13882, records of Klamath 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: 12/7/17 DATED: OREGON HOUSING & COMMUNITY SERVICES DEPT., STATE OF OREGON BY: Julie V Jody, Assistant Director Williams, Substitute Trustee STATE OF OREGON County of Marion. * of Oregon Housing and Community Services, On _______, before me, the undersigned Notary Public, personally appeared Julie V Cody, Assistant Director personally known to me (or proved to me on the basis of satisfactory) and the satisfactory of the 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. OFFICIAL STAMP KATHLEEN MAYUMI CONNOR NOTARY PUBLIC in and for the State of Oregon NOTARY PUBLIC - OREGON COMMISSION NO. 941712 Lathie Connor Printed Name: MY COMMISSION EXPIRES AUGUST 11, 2019 My commission expires: Avaust 11, 2019 STATE OF WASHINGTON COUNTY OF SPOKANE: On _______, 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 in and for the State of Washington Notary Public State of Washington

Printed Name:

My commission expires: