## 2018-008211

Klamath County, Oregon 07/10/2018 02:58:01 PM

Fee: \$87.00

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

**UPF WASHINGTON INCORPORATED** 12410 E MIRABEAU PKWY #100 SPOKANE VALLEY, WA 99216 Ref No. 564568-S(P)(E)

Debra K. Baumgartner

Commission Expires 08-12-2018

## 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 4/30/2003, executed by Doris K Bouchez, as Grantor(s), to Aspen Title and Escrow, as Trustee for Oregon Housing & Community Services Dept., State of Oregon, as beneficiary, which Deed of Trust recorded on 4/30/2003, as Document/Instrument No. N/A, Book No. M03, Page No. 28779, 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 presentBeneficiary and in accordance with the provisions of said Deed of Trust, does hereby reconvey without warranty, to the person or persons legally entitled theretoall the estate now held by him under above Deed of Trust. DATED: **OREGON HOUSING & COMMUNITY** SERVICES DEPT., STATE OF OREGON Kim Freeman, Single Family Housing Brad L. Williams, Substitute Trustee STATE OF OREGON County of Marion. \* of Oregon Housing and Community Services, hne 26th 2018 , 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 h-s/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 - OREGON NOTARY PUBLIC in and for the State of Oregon COMMISSION NO. 941712 Kathleen Mayumi Connor Printed Name: MY COMMISSION EXPIRES AUGUST 11, 2019 My commission expires: 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 NOTARY PUBLIC in and for the State of Washington State of Washington

Printed Name:

My commission expires: