PARCEL ID #: R448750 / R-3809-035CD-04500-000 Requested and Prepared by: Clear Recon Corp 111 SW Columbia Street #950

Portland, OR 97201

When Recorded Mail To: Celink 3900 Capital City Blvd Lansing, MI 48906 2019-009996

Klamath County, Oregon 08/30/2019 01:40:01 PM

Fee: \$82.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

Loan No.: \*\*\*4508 TS No: 082767-OR

APN: R448750 / R-3809-035CD-04500-000

Property Address: 1407 HOPE STREET, KLAMATH FALLS, OR 97603

MERS No. 101222100000363883 MERS Phone No. 1-888-679-6377

MERS Address: P.O. Box 2026, Flint, MI 48501-2026

## ASSIGNMENT OF DEED OF TRUST

FOR VALUE RECEIVED, the undersigned MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS DESIGNATED NOMINEE FOR REVERSE MORTGAGE FUNDING, LLC, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS hereby grants, assigns and transfers to: REVERSE MORTGAGE FUNDING, LLC interest as beneficiary under that certain Deed of Trust dated: 3/12/2008 executed by WANDA L. BECHDOLDT, Trustor(s), to LENDERS FIRST CHOICE, original trustee, and recorded on 3/19/2008, as Instrument No. 2008-003482, of Official Records, in the office of the County Recorder's office of Klamath County, Oregon encumbering the land as fully described in said Deed of Trust and all rights accrued or to accrue under said Deed of Trust.

6/12/16	
Date: 8/12/19	MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.
<del>-</del>	AS DESIGNATED NOMINEE FOR REVERSE MORTGAGE
	FUNDING, LLC, BENEFICIARY OF THE SECURITY
	INSTRUMENT, ITS SUCCESSORS AND ASSIGNS.

By: Kevin Paperd - ASSISTANT Secretary

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.

County of Curton }	
On 8-12-19 before me, Terrisa L	Fills personally appeared
Kevin Paperd	who proved to me on the basis of satisfactory
evidence to be the person(s) whose name(s) is/are subs	cribed to the within instrument and acknowledged to me that
he/she/they executed the same in his/her/their authorize	ed capacity(ies), and that by his/her/their signature(s) on the
instrument the person(s), or the entity upon behalf of w	which the person(s) acted, executed the instrument. I certify
under PENALTY OF PERJURY under the laws of said	d State that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.	William.
	CRISA L'

Signature

State of Michigan

(Seal)