Klamath County, Oregon

09/12/2019 02:47:01 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. 624210-S(P)(E)

> STATE OF WASHINGTON COMMISSION NUMBER 149124 COMMISSION EXPIRES AUG. 12, 2022

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 9/3/2003, executed by Sara Mayfield, as Grantor(s), to AmeriTitle, as Trustee for Oregon Housing & Community Services

Dept., State of Oregon, as beneficiary, which Deed of Trust recorded on 9/4/2003, as Document/Instrument No. N/A, Book No. M03, Page No. 65645, 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. Avgust 22nd 2019 DATED: DATED: **OREGON HOUSING & COMMUNITY** SERVICES, DEPT., STATE OF OREGON BY: Kim Freeman, Single Family Housing Brad L. Williams, Substitute Trustee Manager *of Oregon Housing and Community Services, STATE OF OREGON County of Marion. On Avoids 22 2019, 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. OFFICIAL STAMP KATHLEEN MAYUMI CONNOR NOTARY PUBLIC in and for the State of Oregon NOTARY PUBLIC - OREGON COMMISSION NO. 989665 cathleen Mayumi Connor **Printed Name:** MY COMMISSION EXPIRES JULY 24, 2023 My commission expires: STATE OF WASHINGTON COUNTY OF SPOKANE: , 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. DEBRA K BAUMGARTNER NOTARY PUBLIC in and for the State of Washington NOTARY PUBLIC :

Printed Name: De Drai

My commission expires: