

After Recording, Return To:
Quality Loan Service Corporation of Washington
108 1st Ave South, Suite 202
Seattle, WA 98104

2019-012809

Klamath County, Oregon

11/01/2019 08:44:02 AM

Fee: \$87.00

**AFFIDAVIT OF COMPLIANCE
with ORS 86.748(1)**

Grantor(s): Mark Wishart
Beneficiary: Freedom Mortgage Corporation
Mortgage Servicer: Freedom Mortgage
Trustee: Quality Loan Service Corporation of Washington
Trustee Sale Number: OR-19-862077-RM
Property Address: 3258 HAMMER STREET, KLAMATH FALLS, OR 97603-7187
DOT Rec. Instrument/Book/Page Instrument No. 2018-010571

I, the undersigned, hereby declare that:

(1) I am the ASSISTANT TO THE VICE PRESIDENT of Freedom Mortgage Corporation, who is the Beneficiary in the above referenced trustee's sale.

(2) I certify that the beneficiary and the trustee as of this date are the beneficiary and trustee named above.

(3) ☒ The grantor did not request a foreclosure avoidance measure, and has not been evaluated for any foreclosure avoidance measure.

OR

☐ In accordance with ORS 86.748, a written notice was sent to the grantor(s) explaining in plain language that:

☐ The grantor(s) is/are not eligible for any foreclosure avoidance measure; or

☐ The grantor(s) has/have not complied with the terms of a foreclosure avoidance measure to which the grantor(s) and beneficiary had agreed.

(4) By reason of the above, the beneficiary or beneficiary's agent has complied with the requirements of ORS 86.748(1).

Affidavit of Compliance with ORS 86.748(1)
Trustee Sale Number: OR-19-862077-RM

Date: 10/29/19

Freedom Mortgage Corporation

Signature

Printed name of person signing this affidavit

State of: Indiana

County of: Hamilton

On 10-29-19 before me Mia Carter a notary public personally

appeared John Rapiuchuk, who 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.

I certify under *PENALTY OF PERJURY* under the laws of the state of Indiana that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Mia Carter (NOTARY SEAL)
Signature

