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Cherry Creek Mortgage Co., Inc.pdf Cheryl Henderson.pdf CIS Financial Services, Inc.pdf CIT Bank, N.A.pdf Citizens Bank, N.A.pdf Clackamas County Bank.pdf Clackamas Federal Credit Union.pdf CMG Mortgage, Inc., dba CMG Financial.pdf Colonial Savings, F.A.pdf Columbia Credit Union.pdf Columbia State Bank.pdf Community Bank.pdf Compass Bank.pdf Consolidated Federal Credit Union.pdf CountryPlace Mortgage. Ltd.pdf CrossCountry Mortgage, Inc.pdf Curt Zelmer.pdf Danish Rashed, POD the Rashed trust.pdf David J. Kocer and Ann L. Kocer.pdf David W. Tillery.pdf Deborah Walbel.pdf Deutsche Bank National Trust Company, as certificate trustee on behalf of Bosco Credit II Trust.pdf Deutsche Bank National Trust Company.pdf Diane M. Koenig.pdf Discover Bank.pdf Dollar Bank, Federal Savings Bank.pdf Donald Jester.pdf Douglas R. Schultz.pdf Eagle Home Mortgage, LLC.pdf East Rock Financial, LLC.pdf Eastern Savings Bank, fsb.pdf Entrust Administration Trust FBO Janet Trump.pdf Evergreen Federal Bank.pdf Evergreen Federal Savings and Loan Association.pdf Evergreen Moneysource Mortgage Company.pdf Fairway Fund V, LLC.pdf Fairway Fund V. LLC.pdf FB Acquisition Property XVIII,LLC.pdf Fibre Federal Credit Union.pdf Fifth Third Bank.pdf Fifth Third Mortgage Company.pdf First Community Credit Union.pdf First Guaranty Mortgage Corporation.pdf First Republic Bank.pdf

First Technology Federal Credit Union.pdf First Tennessee Bank National Association, successor thru merger with First Horizon Home Loan Corporation.pdf First Tennessee Bank National Association.pdf Flagstar Bank, FSB.pdf Florence Habitat for Humanity, Inc.pdf Flynn D. Case, TTEE of the Flynn D. Case Trust.pdf Frances N. Babcock.pdf Franklin American Mortgage Company.pdf Freedom Mortgage Corporation.pdf Gesa Credit Union.pdf Gina L. Bonomini.pdf Glade P. Friton Revocable Living Trust.pdf Glenda M. Walters Trust.pdf Guaranty Bank.pdf Guild Mortgage Company.pdf HAPO Community Credit Union.pdf Heritage Grove Federal Credit Union.pdf HMC Assets, LLC Solely In Its Capacity as Separate Trustee.pdf Home Point Financial Corp.pdf Homecoming Property LLC.pdf Homestreet Bank.pdf Household Finance Corporation II.pdf Household Finance Corporation III.pdf HPMC Solutions, LLC.pdf HSBC Bank USA, N.A.pdf HSBC Mortgage Services Inc.pdf Interstate Intrinsic Value Fund A, LLC.pdf IQ Credit Union.pdf Jack Shaw and Jean Ann Shaw.pdf James B. Nutter and Company.pdf James W. Christopherson and Helen M. Christopherson.pdf James Webber II and Keenan Webber.pdf Jerry Kelly.pdf John Helmick.pdf Joseph L Achen and Cynthia C Achen.pdf Kathy Aaron.pdf Keith R. Masterson.pdf KeyBank, N.A.pdf Klamath Public Employees Federal Credit Union.pdf KLRHC (Klamath Lake Regional Housing Center).pdf Kondaur Capital Corporation.pdf Lakeview Loan Servicing, LLC.pdf Land Home Financial Services Inc.pdf

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Pacific West Bank, 2040 8th Avenue, West Linn, OR 97068.pdf Paramount Equity Mortgage, LLC.pdf Partners for Payment Relief DE IV, LLC.pdf Partners for Payment Relief DE II, LLC.pdf Patrick A. Short and Lila M. Short.pdf Paula Rini.pdf PennyMac Loan Services LLC.pdf Pentagon Federal Credit Union.pdf People's Bank of Commerce.pdf People's Community Federal Credit Union.pdf PHH Mortgage Corporation.pdf Pingora Loan Servicing, LLC.pdf Pingora Loan Servicing.pdf Pioneer Trust Bank, NA.pdf Planet Home Lending LLC.pdf Plaza Home Mortgage, Inc.pdf PNC Bank, National Association.pdf Point Property Managment, LLC.pdf Point West Credit Union.pdf Portland Development Commission.pdf Portland Local 8 Federal Credit Union.pdf Premier Community Bank.pdf PrimeLending, A PlainsCapital Company.pdf Providence Federal Credit Union.pdf Provident Funding Associates, L.P.pdf Qualstar Credit Union.pdf Quicken Loans Inc.pdf Red Canoe Credit Union.pdf Regions Bank dba Regions Mortgage.pdf Reverse Mortgage Solutions, Inc.pdf Richard P. Koenig.pdf Richard S. Vaupel.pdf Richard Seales.pdf Rivermark Community Credit Union.pdf **Riverview Community Bank.pdf** RLF Mortgage Corporation.pdf Robert Novara.pdf Roderick C. and Sherry K. Hoglan Family Trust.pdf Rogue Credit Union, successor in interest.pdf Roy L. and Beth A. Reynolds.pdf Seattle Bank.pdf Second Chance Home Loans LLC.pdf Second Chance Home Loans.pdf SELCO Community Credit Union.pdf

Selene Finance LP.pdf Sharon Schweietzer.pdf Sherrae M. Vaupel.pdf Sierra Pacific Mortgage Company, Inc.pdf Silvergate Bank.pdf South Coast ILWU Federal Credit Union.pdf South Pacific Financial Corporation.pdf St Helens Community Federal Credit Union.pdf State Farm Bank, F.S.B.pdf Stearns Lending, LLC.pdf Steve Aaron.pdf Steve Hanson.pdf Stratton Associates LLC Employee Profit Sharing.pdf Summit Bank.pdf Sun Trust Mortgage, Inc.pdf Sunset Science Park FCU.pdf SunTrust Bank.pdf Susan Heinz.pdf Sylvia G. Bartholomew and Vic Bartholomew.pdf Syncretic Financial, Inc.pdf TCF National Bank.pdf Teamsters Council #37 Federal Credit Union.pdf The DeSantis Family Limited Partnership.pdf The Money Source Inc.pdf Thrivent Federal Credit Union.pdf Tom Block.pdf Trailhead Federal Credit Union.pdf Trifera, LLC.pdf TruHome Solutions, LLC.pdf TTG Holdings LLC.pdf TwinStar Credit Union.pdf U.S. Bank National Association, not in its individual capacity but solely as trustee.pdf Umatilla County Federal Credit Union.pdf Umpgua Bank.pdf United Advantage Northwest Federal Credit Union.pdf United Guaranty Residential Insurance Co. of North Carolina.pdf United Security Financial Corp.pdf Unitus Community Credit Union.pdf Universal American Mortgage Company, LLC.pdf USAA Federal Savings Bank.pdf USAgencies Credit Union.pdf Valley Credit Union.pdf Vanderbilt Mortgage and Finance, Inc.pdf Verity Credit Union.pdf

Wallick and Volk.pdf Washington Federal.pdf Washington Trust Bank.pdf Wauna Credit Union (formerly Wauna Federal Credit Union).pdf Webster Bank.pdf WEI Mortgage LLC.pdf Willamette Falls Holdings, LLC.pdf Willamette Valley Bank.pdf Yakima Federal Savings and Loan Association.pdf ZB, National Association.pdf



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | 20 Cap Fund I, LLC |
|---------------------|--------------------|
| Jurisdiction* | |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Lars Bell (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

| 2. The | indersigned further certifies that she/he: <i>[check only one of the following boxes]</i> is the individual clalming exemption from requirements established under Or Laws 2013, ch 304, o |
|----------|---|
| ζ] | is the Managing Member [insert title] of the entity claiming |
| exe | ption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity |
| | ecute this affidavit on its behalf. |
| | (Signature) |
| State of |) |

County of ______)
Signed and sworn to (or affirmed) before me this _____ day of _____, ____, _____,

) ss.

| Notary Public for | |
|------------------------|--|
| My commission expires: | |

CALIFORNIA JURAT WITH AFFIANT STATEMENT **GOVERNMENT CODE § 8202** See Attached Document (Notary to cross out lines 1-6 below) See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary) 1 12 3 Ą 5 Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any) 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. State of California Subscribed and sworn to (or affirmed) before me County of San Diego on this <u>le</u> day of <u>January</u>, 20<u>17</u>, by <u>Date</u> <u>Month</u> <u>Year</u> bγ (1)______ Lars Bell (and (2)_______ Name(\$) of Signer(\$) JENNIFER RIMER Commission # 2057860 proved to me on the basis of satisfactory evidence Notary Public - California to be the person(s) who appeared before me. San Diego County My Comm. Expires Feb 28, 2018 Signature_____ Signature of Notary Public Seal Place Notary Seal Above OPTIONAL -Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unIntended document. **Description of Attached Document** Title or Type of Document: _____ Document Date: _____ Number of Pages: _____ Signer(s) Other Than Named Above: ___ ©2014 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5910

21st Mortgage Corporation Attn: Troy D. Suggs 620 Market Street, Suite 100 Knoxville, TN 37901

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

Lender/Beneficiary: 21st Mortgage Corporation

Jurisdiction* Delaware

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Troy D. Suggs</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______6 ____[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [X] is the <u>Legal/Foreclosure Department Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of TN) ss. County of KNox) Signed and sworn to (or affirmed) before me this 17^{th} day of by 10^{th} 5^{th} 5^{th} 5^{th} Soan Notary Public for TA صورو/ مر/ما My commission expires: _____

Information for Beneficiaries, Lenders and Servicers

On or after August 4th, 2013 (Operative date for SB 558)

• Exemption Requests on or after August 4th, 2013. The requirements of SB 558 do not apply to a beneficiary who submits to the Attorney General a sworn affidavit that states that during the preceding calendar year the beneficiary did not commence more than 175 actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010. A form will be available for this purpose at

http://www.doj.state.or.us/consumer/pages/foreclosure_mediation_forms.aspx. Once completed, the form may be provided to the Attorney General by emailing a copy to

DOJ@foreclosuremediationOR.org or by mailing to: Oregon Foreclosure Avoidance Program, Oregon Department of Justice, 1162 Court Street NE, Salem, OR 97301-4096. [Note that exemption requests made pursuant to Senate Bill 1552 (Oregon Laws 2012 chapter 112) are not acceptable for purposes of seeking an exemption from the requirements of SB 558. SB 558 Exemption Affidavits will not be accepted prior to the operative date of the legislation, August 4th, 2013.]

Exemptions Claimed in 2016 pursuant to SB 558

- · Listing of Affidavits Received
- View an Affidavit

Exemptions Claimed in 2015 pursuant to SB 558

360 MORTGAGE GROUP, LLC ATTN DONALD HAWKINS 11305 FOUR POINTS DRIVE BUILDING 1 SUITE 200 AUSTIN, TX 78726

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | 360 MORTGAGE GROUP, LLC | |
|---------------------|-------------------------|--|
| Jurisdiction* | DELAWARE | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, JACK CARROLL (printed name) being first duly sworn, depose, and state that:

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [//] is the <u>ASSISTANT VICE PRESIDENT</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| State of | <u>TEXAS</u>)) ss. | | (Signature) | Jac | ck Carroll | AVP |
|---------------------|---|---|------------------------|------------|---------------|--------|
| | f <u>TRAVIS</u>) | | | | | |
| Signed ar | nd sworn to (or afflrn | ed) before me t | this <u>13</u> 4 day o | f Janua | iry jê | 2017 |
| by | Thek Carroll | <u> </u> | | | | |
| | | | - 1 have | lo /2 | l JR | |
| | | | Notary Public f | for Trac | 1'S County | ······ |
| | | | My commission | n expires: | May 15 | 2017 |
| | <u> </u> | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | \mathcal{O} | |
| NOT WITH OUT IT WAS | ROBERTO BERNAL JR My Commission Expire May 15, 2017 | | | | | |
| | | - CA | | | | |

ECEIVI JAN 23 2017 DEPARTMENT OF PORTLAND LEGAL

MONSON LAW OFFICE P.C. 1865 NW 169th Place, Suite 208 Beaverton, OR 97006

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Advantis Credit Union |
|---------------------|-----------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Robert Corwin (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____4___[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>President/CEO</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for Advantis

a landa biratu yu ji ay yaƙa ƙasar Nana langa maya ƙasar ta ƙasar

My commission expires: January

131. T.

(Signature)

State of <u>Oregon</u>)) ss.

County of <u>Clackamas</u>)

Signed and sworn to (or affirmed) before me this <u>23</u> day of <u>January</u>, <u>2017</u> by <u>Robert Corwin</u>. <u>Michael History</u>

OFFICIAL STAMP MICHAEL CHRISTOPHER HINTON NOTARY PUBLIC-OREGON COMMISSION NO. 946092 MY COMMISSION EXPIRES JANUARY 13, 2020

1921 Premier Drive PO Box 4249 Mankato, MN 56002-4249



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | AgStar Financial Services, FLCA |
|---------------------|---------------------------------|
| Jurisdiction* | Minnesota |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Cheryl Biaschko (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

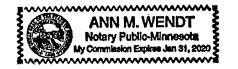
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 1_______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Lending Services Team Leader</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(and

State of <u>MN</u>)) ss.

County of <u>Biue Earth</u>)

Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>March</u> by Ann M. Wendt 2017



Notary Public for <u>Blue Earth County</u> My commission expires: <u>01/31/2020</u>

Alaska USA'Federal Credit Union PO Box 196200 Anchorage, AK 99519-6200 Attention: SC Compliance Manager

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Alaska USA Federal Credit Union |
|---------------------|---------------------------------|
| Jurisdiction* | Alaska |

*il Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Wayne Bailey (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>Chief Lending Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on Its behalf.

State of Alaska

My Commission Expires Mar. 13, 2018

County of <u>sudicial</u> District. Signed and sworn to (or affirmed) before me this <u>leth</u> day of <u>Danuary</u>, <u>2017</u> by <u>wayne</u> <u>Bailey</u>, <u>Chief Lending</u> <u>Officer</u> <u>Notary Public</u> **DIANA M. HANLIN** State of Alagka

| F 395 SI DECT S <u>After recor</u> Christopher R Ambrose Law | Group LLC Ave., Ste. 200 | Deschutes County Official Records 2017-004260 M-EA 02/01/2017 02:39:00 PM Stn=0 PG 02/01/2017 02:39:00 PM \$11.00 \$21.00 \$10.00 \$5.00 \$6.00 \$53.00 . Namey Blankenship, County Clerk for Deschutes County, Oregon, certify that the Instrument Identified herein was recorded in the Clerk records. Nancy Blankenship - County Clerk FEB 1 3 2017 |
|--|--|---|
| | | DEPARTMENT OF JUSTICE |
| | | ORECLOSURE AVOIDANCE PROGRAM |
| | Lender/Beneficiary: | Alera Management Group, LLC |
| | Jurisdiction* | Oregon |
| *If Lender/Benefi | ciary is not a natural person, p | rovide the state or other jurisdiction in which the Lender/Beneficiary is organized. |
| 1, Gar | y Woolworth | (printed name) being first duly sworn, depose, and state that: |
| The all to consale u affidat 2. The un [] i exemption | nmence the following num nder ORS 86.752 or by s vit: <u>0</u> [not ndersigned further certifie is the individual claiming is the CEO | es that she/he: <i>[check only one of the following boxes]</i> exemption from requirements established under Or Laws 2013, ch 304, or <i>[insert title]</i> of the entity claiming established under Or Laws 2013, ch 304, and is authorized by such entity |
| Otate of a | , | (Signature) |
| State of <u>Oreg</u> County of <u>Ch</u> Signed and sw by <u>Gao</u> |) ss. | e me this <u>18</u> th day of <u>January</u> , <u>2017</u> |
| • | 1 | |
| | OFFICIAL STAMP ENJAMIN ROBERT WILTGE NOTARY PUBLIC-OREGON COMMISSION NO. 932532 DMMISSION EXPIRES NOVEMBER 09, 2 | $\phi_{ij}(x) = \phi_{ij}(x) + \phi_{i$ |
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DEPARTMENT

PORTLAND

Recording Requested By:

Jack Davis 515 E Main Street Ashland, OR 97520

When Recorded Mail To:

Jack Davis 515 E. Main Street Ashland, OR 97520

(This Space for Recorder's Use)

BENEFICIARY EXEMPTION AFFIDAVIT

Allen W. Koftinow, Trustee of the Allen W. Koftinow Trust of June 12, 1996, being first duly sworn, depose and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, Chapter 304, $\S2(1)(b)$.

1. The above named trust deed beneficiary commenced, or caused an affiliate or agent of the undersigned to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: None

2. The undersigned further certifies that the undersigned is the beneficiary claiming exemption from requirements established under Or Laws 2013, Chapter 304.

Allen W. Koftinow, Trustee

STATE OF HAWAII

CERTIFICATION

NOTARY

Second Circuit

Doc. Date: 05/17/17 # Pages:

Description Develo

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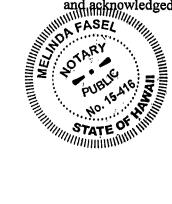
Melinda Fasel

Exemption

COUNTY OF MALL

On this 17th day of May, 2017, personally appeared the above-named Allen W. Koftinow, and acknowledged the foregoing instrument to be a voluntary act and deed. Before me:

) §



Notary Public for Hawaii My Commission Expires: 10-10(e/70)



DEPARTMENT OF JUSTICE PORTLAND L

OREGON FORECLOSURE AVOIDANCE PROGRAM **BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | Alta M. Taylor, Trustee of the Alta M. Taylor Survivor's Trust |
|---------------------|--|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: |. Alta M. Taylor, Trustee

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [🗸] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming) is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for Oregon

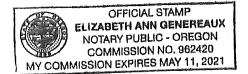
My commission expires:

<u>Altrem Jayson TTEE</u> (Signature)

7021

State of Oregon) ss.

County of Lane) Signed and sworn to (or affirmed) before me this /4 day of July 2017 by Alta M. Taylor, Trustee of the Alta M. Taylor Survivor's Trust



William M. Ganong Attorney at Law 514 Walnut Avenue Klamath Falls OR 97601



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | | Alvin L. Van Hulzen and Jean Van Hulzen, husband and wife |
|---------------------|---------------|---|
| | Jurisdiction* | Klamath County, Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Alvin L. Van Hulzen and Jean Van Hulzen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [√] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the _______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

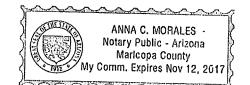
(Signature)

State of Arizma)

) ss.

County of <u>Warielyna</u>) Signed and sworn to (or affirmed) before me this <u>AS</u> day of <u>January</u>, <u>2017</u> by <u>Alvin L. Van Hulzen and Jean Van Hulzen</u>

Notary Public for State of Hrizina My commission expires: //-/,2-;2



Form 300 V7/5/13



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | American Francial Resources, The |
|---------------------|----------------------------------|
| Jurisdiction* | New Juscy |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Corey Dub with f (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];
- The undersigned further certifies that she/he:[check only one of the following boxes]
 [___]is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___]is the________[insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>New Jersey</u>) State of <u>New Jersey</u>) ()ss. County of <u>Morris</u>) (Signature)

Form300V7/5/13

Signed and sworn to (or affirmed) before me this bth day of June by Orey Dubnoff 2017 Totvatoriel Jisa Notary Public for New Jersey My commission expires: 10/12 202 1 LISA A. SALVATORIELLO NOTARY PUBLIC STATE OF NEW JERSEY MY COMMISSION EXPIRES OCT. 12, 2021

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Form300V7/5/13



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | AmeriHome Mortgage Company, LLC |
|---------------------|--------------------------------------|
| Jurisdiction* | A Delaware Limited Liability Company |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Sheryl R. Valvo (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>4</u>______[not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [XX] is the <u>Assistant Vice President, Default Servicing</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

(Signature)

State of California

County of Los Angeles)

Signed and sworn to (or affirmed) before me this 20th day of January , 2017 by <u>Shcryl R. Valvo</u> Wellson S. Castaneda



) ss.

Notary Public for My commission expires:



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Anthony | Ε. | Campbell, | aka | Tony | Campbel1 |
|---------------------|---------|----|-----------|-----|------|----------|
| Jurisdiction* | Oregon | | | | | |
| | | | | | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Anthony E. Campbell</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>none</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [X] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Oregon)

County of Yamhill)

Signed and swom to (or affirmed) before me this 30th day of January , 2017 by Anthony E. Campbell aka Tony Campbell



) ss.

| Notary Public for | 1 1 | |
|-------------------|---------|----|
| My commission e | xpires: | 19 |

MINA KLEF / 12

Steven D. Gerttula, Attorney 416 Bond Street Astoria, OR 97103



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Donald Jester a | nd Arlene Jester |
|---------------------|-----------------|------------------|
| Jurisdiction* | n/a | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Arlene Jester (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Zero (0)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [√] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Washington</u>)) ss. County of <u>LEWIS</u>) Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>November</u>, <u>2016</u> by <u>Donald Jester</u> <u>MITC</u> <u>Notary Public for <u>Washington</u> My commission expires: <u>1-1-2017</u></u>

Cosgrave Vergeer Kester LLP Attn: Daniel C. Peterson 888 SW Fifth Avenue, Suite 500 Portland, OR 97204

State of Oreyon

) ss.

MY COMMISSION EXPIRES MAY 6, 2019



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Arthur J. Jones & Betty K. Jones, Co Trustees |
|-------------------------|---|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Arthur J. Jones and Betty K. Jones (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature

County of <u>ClarKasnas</u>) Signed and sworn to (or affirmed) before me this <u>ZZndday of MAY</u>, <u>2017</u> by <u>Betty</u> <u>Somes</u> and <u>Arthur</u> <u>Somes</u> <u>Arcen</u> <u>May</u> Notary Public for <u>Oreg on</u> <u>Notary Public for <u>S16/2019</u> My commission expires: <u>516/2019</u></u>



www.astorlabank.com

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM **BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | Astoria Bank | |
|---------------------|--------------|--|
| Jurisdiction* | New York | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: | Walter Krzyminski

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 (None) [not to exceed 175],
- 2. The undersigned further certifies that she/he: *[check only one of the following boxes]*] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming [1] is the <u>Vice President</u> exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on Its behalf.

(Signature)

State of New York)) SS.

County of Nassau _)

2017 Signed and sworn to (or affirmed) before me this 25 day of January by Walter Krzyminski, VP Notary Public for New a My commission expires:

> DELITA I. ALLEN-SMITH Notary Public, State of New York No. 01AL6052148 Qualitied in Masseu County Commission Expires Dec. 11, 2018

> > Form 300 V7/5/13

Baker Boyer National Bank Attn: Julie M. King PO Box 1796 Walla Walla, WA 99362

DECEIVED

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Baker Boyer National Bank |] |
|---------------------|---------------------------|---|
| Jurisdiction* | Washington | 1 |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Russell S. Colombo</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>_______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Vice President, Senior Credit Administrator</u> *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Washington</u>)) ss. County of <u>Walla Walla</u>) Signed and sworn to (or affirmed) before me this <u>11th</u> day of <u>January</u>, <u>2017</u> by <u>Russell S. Colombo</u> Wotary Public for <u>Washington</u> My commission expires: <u>July 22, 2019</u>

Malheur County Title Company 81 South Oregon Street Ontario, OR 97914

RECEIVED JUL 1 0 2017

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Bank of Eastern Oregon |
|---------------------|------------------------|
| Jurisdiction* | Malheur County |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Brian DiFonzo (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u>________ [not to exceed 175];

| 2. | The undersigned further certifies that she/ | e: [check only one of the following boxes] | |
|----|---|---|---|
| | [] is the individual claiming exemption | om requirements established under Or Laws 2013, ch 304, o | r |
| | [X] is the A Horney | [insert title] of the entity claiming | |
| | | nder Or Laws 2013, ch 304, and is authorized by such entity | F |
| | to execute this affidavit on its behalf. | | |
| | 1 | hi la han | |

My commission expires:

(Signature)

 State of <u>Oregon</u>)
) ss.

 County of <u>Malheur</u>)
)

 Signed and sworn to (or affirmed) before me this <u>Mallul</u> day of <u>July</u>, <u>2017</u>

 by <u>Brian DiFonzo</u>
 .

 OFFICIAL STAMP
 Notary Public for <u>Oregon</u>



| •, , | | |
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CIVIL ENFORCEMENT DIVISION

Attn: Wayne Kepfer Bank of the Pacific 1216 Skyview Drive Aberdeen, WA 98520

OREGON FORECLOSURE AVOIDANCE PROGRAM

| _ | BENEFICIART EXEMPTION ATTIDAVIT | | |
|---|---------------------------------|---------------------|--|
| | Lender/Beneficiary: | Bank of the Pacific | |
| | Jurisdiction* | Washington | |

DENECICIADY EVEMPTION AFFIDAVIT

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Wayne Kepfer (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____1 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| /- |
|---------------|
| <u>, 2016</u> |
| _ ' |
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| |

Bank of the West 13505 California Street Mail Stop NE BBP 02 M Omaha, NE 68154

DEPARTMENT OF JUS

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Bank of the West |
|---------------------|------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Tina Vance______ (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0_______[not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>Assistant Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Nebraska) SS. County of Douglas 2017 Signed and sworn to (or affirmed) before me this <u>13</u> day of Janua ance by _ Notary Public for 5 2018 May Slate of Nebraska - General Nolary WALTER HESS My Commission Expires May 5, 2018 My commission expires: __

Bank2 Attn: Servicing Department 909 S Meridian Oklahoma City, OK 73108

01.1.7



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Bank2 |
|---------------------|-------------------|
| Jurisdiction* | Oklahoma City, OK |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Gene Watson (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>one</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Gene Watson, SVP Mortgage Lending</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

| State of <u>Oklahoma</u>) | | |
|--|---|----|
|) ss. | | |
| County of 1014411/0114) Canadian | | |
| Signed and sworn to (or affirmed) before me th | nis <u>11th</u> day of <u>May</u> , <u>20</u> | 17 |
| by Gene Watson, SVP Mortgage Lending | | |
| summer G. How and the | _ Cull Fride | |
| 4 13009525 | Notary Public for <u>Canadian County</u> | |
| EXP. 10/15/17 | My commission expires: 10/15/17 | |
| (* 13009525) (St EXP. 10/15/17) (Provide State S | | |
| Martin OK OKLANIN | | |



Tomasi Salyer Martin 121 SW Morrison Street, Ste. 1850 Portland, OR 97204 DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Banner Bank |
|---------------------|-------------|
| Jurisdiction* | Washington |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Penne Oberg (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>18</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] Is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Washington)) ss. County of Walla Walla) Signed and sworn to (or affirmed) before me this 13th ____ day of January 2017 by Penne Oberg SVP nBa. Ancent 12-Notary Public for Washington KRISTA H. VINCENT 30,2020 My commission expires: August Notary Public State of Washington opointment Expl at 30. 2020

Form 300 V7/5/13

Jay Faulconer 460 SW Madison Ste 18 Corvallis OR 97333



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Barbara Kelly |
|---------------------|---------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Barbara Kelly (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

asbase Me (Signature)

State of <u>Washington</u>)) ss. County of <u>Island</u>) Signed and sworn to (or affirmed) before me this <u>8th</u> day of <u>February</u>, <u>2017</u> by <u>Barbara Kelly</u> Notary Public State of Washington BARBARA SARGENT My Appointment Expires Dec 5, 2017



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | BEAL BANK |
|---------------------|----------------------------|
| Jurisdiction* | A TEXAS STATE SAVINGS BANK |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary Is organized.

I, GRANT A. HAMILTON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>AUTHORIZED LOAN SERVICER</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

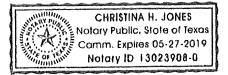
My commission expires: 05 - 27 - 2019

(Slanature)

State of <u>TEXAS</u>)

County of <u>COLLIN</u>)

| Signed and sworn to (or affirmed) before me this <u>06</u> day of <u>JANUARY</u> | 2017 |
|---|------|
| by Grant A. Hamilton, Vice President, Compliance & Operations, MGC Mortgage, Inc. | |
| Christian 74 yours | |
| Notary Public for Collin Count | ťΥ |
| | |



 r^{1}

Beneficial Financial I Inc. 1421 W. Shure Drive, Suite 100 Arlington Heights, IL 60004



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| L | ender/Beneficiary: | Beneficial Financial I Inc. |
|---|--------------------|-----------------------------|
| | Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Marc Giacovelli (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [...] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the <u>Vice President, State Regulatory Administration Division</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | Mare Simpreth- | |
|---|---|----------|
| | (Signature) | |
| State of Illinois) | | |
|) ss. County of <u><i>Dulage</i></u>) | | |
| Signed and sworn to (or affirmed) before me the | his ^{9lh} day of <mark>January</mark> , | 2017 |
| by Sean E. Casey | P | |
| / | - Jul J | |
| | Notary Public for <i>Illines</i> | |
| | My commission expires: <u>$4/1/201$</u> | <u>7</u> |
| | OFFICIAL SEAL SEAN E CASEY | |
| | NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:04/01/17 | |
| | | |

Beneficial Oregon Inc. 1421 W. Shure Drive, Suite 100 Arlington Heights, IL 60004



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Beneficial Oregon Inc. |
|---------------------|------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Marc Giacovelli (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes] [...] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the <u>Vice President, State Regulatory Administration Division</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | Mare Siecouth |
|--|--|
| State of Illinois) | (Signature) |
|) ss. County of <u>Du/15c</u>) | |
| Signed and sworn to (or affirmed) before me th | |
| by <u>Sean E. Case</u> | Notary Public for <u>Fllin ofs</u> |
| | My commission expires: 4/1/2017 |
| | OFFICIAL SEAL SEAN E CASEY NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:04/01/17 |

| R | ECEIVE | M |
|-----|---------------|---|
| u u | APR 23 2017 · | U |

DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM

| Lender/Beneficiary: | Bernice Lois Jamieson |
|---------------------|-----------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Becnice Lois Tamieson</u> (printed name) being first duly swom, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [____] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the _______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

State of (

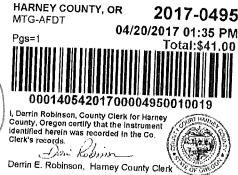
County of 4 Signed and swom to (or affirmed) before me this gold 2017 day of _ () MLCI by

Notary Public for 3.4. My commission expires:



Law Office of Paul Heatherman PC PO Box 8 Bend, OR 97709





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | | Betty J. Vinson, Trustee of the Betty J. Vinson Trust - 7/23/13 |
|---------------------|---------------|---|
| | Jurisdiction* | |

"If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Betty J. Vinson, Trustee (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _________ (not to exceed 175);

(Signature)

State of <u>Oregon</u>)

) ss. County of Weschütes)

| Signed and sworn to (or affirmed) before me | this 31 day of March | , 2017 |
|---|----------------------------------|----------|
| by Betty J. Vinson, Trustee of the Betty J, V | inson Trust dated July 23, 2013, | |
| | Christine gronne M | Kinley |
| | Notary Public for Gregon | <u> </u> |
| | My commission expires: May 17 | 2019 |
| | | |

OFFICIAL STAMP CHRISTINE YVONNE MCKINLEY NOTARY PUBLIC-OREGON COMMISSION NO. 938899 MY COMMISSION EXPIRES MAY17, 2019



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Beverly M. Tillen |
|---------------------|-------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>BEVEVILL</u> (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None</u> Inot to exceed 175];

Deverly Sillerge (SIgnature) State of <u>Animan</u>)) ss. County of <u>Ymm</u>) Signed and sworn to (or affirmed) before me this <u>7</u>²¹ day of _____ by Bevery M. Trucery Notary Public for Juna, Anizina Official Seal NOTARY PUBLIC STATE OF ARIZONA County of Yuma MICHAEL J, MATIAS My Commission Expires May 13, 2020 My commission expires: May 13, 20 20

BLUE MOUNTAIN CREDIT UNION 520 S College Avenue College Place, WA 99324



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | BLUE MOUNTAIN CREDIT UNION | |
|---------------------|----------------------------|--|
| Jurisdiction* | STATE OF WASHINGTON | |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, JIM DRAKE (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: 0______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>PRESIDENT. CEO</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature

State of <u>Washington</u>)

) ss. County of <u>Walla Walla</u>) Signed and sworn to (or affirmed) before me this <u>4th</u> day of <u>January</u>, <u>2017</u> by <u>Jim Drake</u>



Notary Public for <u>Washington</u> My commission expires: <u>March 5, 2017</u>

Ryan Ko PO BOX 97050 MS 1155-2 Seattle, WA 98168



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Boeing Employees' Credit Union |
|---------------------|--------------------------------|
| Jurisdiction* | Washington State |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

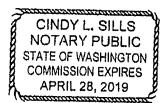
I, JIm Tiegen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice President of Portfolio Mangagement</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature

State of \mathcal{U} SS.



Notary Public for zer My commission expires:

BB&T Attn. Patrick Carper 7701 Airport Center Dr. 4th Floor Greensboro, NC 27409



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Branch Banking.and Trust Co. |
|---------------------|------------------------------|
| Jurisdiction* | North Carolina |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Patrick Carper (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Four (4)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature)

State of North Capling

) ss. County of <u>Guil Brd</u>) Signed and sworn to (or affirmed) before me this <u>3</u> day of <u>Jawuary</u>, <u>2017</u> by <u>Partrick Carper</u>

Notary Public for a RoliNA My commission expires:



LINDSAY HART LLP 6211 BUENA VISTA DRIVE VANCOUVER WA 98661-7609

DECEIVED

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Budget Capital Corporation |
|---------------------|----------------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Noah Furie (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit; 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the Executive Vice President [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on Its behalf.

LINDSAY HART LLP 6211 BUENA VISTA DRIVE VANCOUVER WA 98661-7609

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CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Budget Finance Company | · | |
|---------------------|------------------------|---|--|
| Jurisdiction* | California | | |

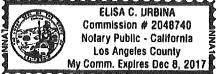
*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneliciary is organized.

I, Noah Furie (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 2 [not to exceed 175],
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√_] is the Executive Vice President [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) Noah Furie State of California) ss. County of Los Angeles) Signed and sworn to (or affirmed) before me this day of January 2017 by Noah Furie, Executive Vice President of Budget Finance Comp Notary Public for California My commission expires: Decr OK





Stephen W. Kaser Stephen W. Kaser P.C. 880 SE Jackson Street PO Box 1061 Roseburg, OR 97470

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | | C.W. Lebengood, aka Carl William Lebengood | |
|---------------------|---------------|--|--|
| | Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, C.W. Lebengood, aka Carl William Lebengood (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86,752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ___0 _____ [not to exceed 175];

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Douglas</u>) Signed and sworn to (or affirmed) before me this <u>// th</u> day of <u>January</u>, <u>2017</u> by <u>C.W. Lebengood</u>, <u>aka Carl William Lebengood</u> <u>Sancha Achie</u> Notary Public for <u>Oregon</u> My commission expires: 12/01/2019



Oregon Foreclosure Avoidance Program Oregon Department of Justice 1162 Court Street NE Salem, OR 97301-4096



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Capital One, N.A. | |
|---------------------|-----------------------------|--|
| Jurisdiction* | Chartered under federal law | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Hilary D. Jackson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>4</u>______[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the Vice President _ [insert title] of the entity claiming exemption from requirements established under Dr Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. (Signature) State of Texas

) SS. County of Collin Signed and sworn to (or affirmed) before me this _____ day of c nual Jackson bv Notary Public for Texas My commission expires: February 2020 LORI A. SPISAK

NOTARY PUBLIC - STATE OF TEXAS ID# 1 3 0 5 5 7 9 8 - 5 COMM. EXP. 02-26-2020

Stephen W. Kaser Stephen W. Kaser P.C. 880 SE Jackson Street PO Box 1061 Roseburg, OR 97470

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Carl Scott Lebengood |
|---------------------|----------------------|
| Jurisdiction* | |

'If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Carl Scott Lebengood (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

Sianature

State of <u>Oregon</u>)) ss. County of <u>Douglas</u>) Signed and sworn to (or affirmed) before me this <u>II</u>th day of <u>January</u>, <u>2017</u> by <u>C.W. Lebengood</u>, <u>aka Carl William Lebengood</u> <u>Sandra F Richie</u> Notary Public for <u>Oregon</u> My commission expires: <u>12/01/2019</u>



Jane C. Hanawalt, Attorney P.O. Box 1153 Florence, Oregon 97439



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Carolyn J. Palmer |
|---------------------|-------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Carolyn J. Palmer (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

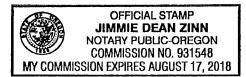
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [1] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [1] Is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

ch (Signature)

State of OREGON)

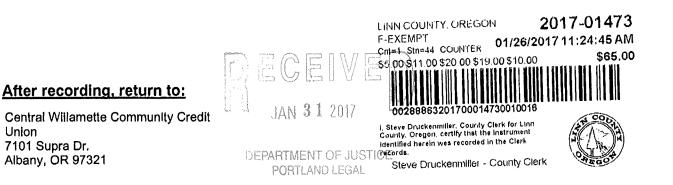
County of Lane

Signed and sworn to (or affirmed) before me this 10th day of February , 2017 by CAROLYN J. PALMER .



) ss.

| Notary Public for Ove | aun |
|------------------------|----------------|
| My commission expires: | August 17,2018 |
| | · · · · · |



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Central Willamette Community Credit Union |
|---------------------|---|
| Jurisdiction* | Oregon |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: i. Stacie Wyss-Schoenborn

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

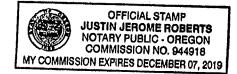
1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert the] of the entity claiming [✓] is the President/CEO exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

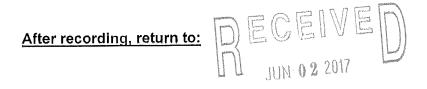
(Signature)

State of Oregon) ss. County of Linn Signed and sworn to (or affirmed) before me this 25th day of January by Stacle Wyss-Schoenborn as President/CEO or Central Williamette Community CU



Union

| د ار ا | VI- | | |
|-------------------|------------|--------|---|
| Notary Public for | OLEGON | | |
| My commission ex | koires: 12 | 7/2019 | _ |
| | | | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CERASTES, LLC |
|---------------------|---------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Holly Chaffin (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None _____ [not to exceed 175];</u>
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>authorized Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Washington</u>)) ss.

County of <u>KING</u>) Signed and sworn to (or affirmed) before me this <u>2nd</u> day of <u>June</u>, <u>2017</u> by <u>HOLLY CHAFFIN</u>



Notary Public for <u>State of Washington</u> My commission expires: <u>Sept. 2. 2017</u>

Charles Schwab Bank Attn: Stephen D. Wagner, Managing Director 2360 Corporate Circle Henderson, NV 89074



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Charles Schwab Bank |
|---------------------|---------------------|
| Jurisdiction* | State of Nevada |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Stephen Masterson</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the <u>Vice President - Chief Lending Officer</u> *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Nevada) ss. County of Clark) Signed and sworn to (or affirmed) before me this $\frac{2}{\sqrt{3}}$ dav of Masterson by 57 ala Notary Public for MICHAEL J. MOORE Ø 20 My commission expires: Notary Public State of Nevada No. 08-7991-1 My Appt. Exp. September 11, 2020

Cherry Creek Mortgage Co., Inc. 7600 E Orchard Road, Suite 250N Greenwood Village, CO 80111



DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Londor/Ronoficiany | | ž |
|----------------------|---|--|---|
| 1.1.1 | Lenuen Denendary. | Cherry Creek Mortgage Co., Inc. | 1 |
| in the second second | Jurisdiction* | Colorado | |
| | (a) A start of the second sec second second sec | [雪子][雷][[[[[[]]]]][[[]]]][[[]]]][[[]]]][[]]][[]]][[]]][[]]][[]]][[]][[]]][[]][[]][[]]][[]][[]][[]][[]][[]][[]]][[][] | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, John K. Carson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];

The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>VP</u>. Chief Legal and Compliance Officer [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for Colorado

My commission expires: 10/18/2017

(Signaturé

State of <u>Colorado</u>)) ss. County of <u>Arapahoe</u>) Signed and sworn to (or affirmed) before me this <u>A</u> day of <u>December</u>, by John K. Carson

ANDRA BURLING

Form 300 V7/5/13



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Chervi | Henderson | |
|---------------------|--------|-----------|--|
| Jurisdiction* | · | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Cheryl Henderson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>I</u> not to exceed 175];

herif temarson State of OR) ss. County of Lane) Signed and sworn to (or affirmed) before me this <u>30th</u> day of <u>January</u> by andrew andro. Notary Public for State of Oregon My commission expires: October 09, OFFICIAL STAMP ANDREW STEVEN MARICLE NOTARY PUBLIC - OREGON 网络拉马克 医马克氏菌素 化合同原氨基 化合物性成素 网络 COMMISSION NO. 955169 MY COMMISSION EXPIRES OCTOBER 05, 2020 1999 (1997) - 1997) 1997 - 1997 $\{y_{i}, \dots, y_{i}\} \in \{y_{i}\}$

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CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CIS Financial Services, Inc. |
|---------------------|------------------------------|
| Jurisdiction* | Alabama |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

Lorna ____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: (D) [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or I vis the assistant vice president [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of \mathcal{H} nama)) ss. County of MO Signed and sworn to (or affirmed) before me this 20th day of Januar Loma CARM Notary Public for 2 \mathcal{O} My commission expires: AM111120

CIT Bank, N.A. c/o Juan Lopez 2900 Esperanza Crossing Austin, TX 78758

| \square | EC | EIV | EN | Concerning of the second se |
|-----------|----|----------|----|---|
| | | ¢ 0 2017 | Ľ | |

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CiT Bank, N.A. |
|---------------------|----------------------|
| Jurisdiction* | National Association |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized,

I, Jon Dickerson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>120</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Director</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature

State of <u>Texas</u>)) ss.

County of Travis

Signed and sworn to (or affirmed) before me this <u>10th</u> day of <u>January</u>, <u>2017</u> by <u>Jon Dickerson</u>



Katherine A S Braddock Notary Public for Texas 5-20-2018 My commission expires:

DECEIVED N FEB 0.3 2017

Rhonda Wells 10561 Telegraph Road Glen Allen, VA. 23059

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Citizens Bank, N.A. |
|---------------------|---------------------|
| Jurisdiction* | Rhode Island |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Rhonda Wells (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86,752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[√] is the <u>Senior Foreclosure Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Common WEALTH State of VIRGINIA (Signature)

) ss. County of HENRICO) Signed and sworn to (or affirmed) before me this 267# day of JANUAR 2017 by RHONDA M. WELLS. SVA Bary Public for Common WEALTH OF VIRGINIA My commission expires: $MA \sqrt{3}$ BERNICE RUSSELL NOTARY PUBLIC REG. #260584 COMMONWEALTH OF VIRGINIA MY COMMISSION EXPIRES MAY 31, 2020

Clackamas County Bank PO box 38 Sandy OR 97055

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Ciackamas County Bank |
|-------------------------|-----------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Lisa Hanson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Chief Credit Officer</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

Sisa dalare

State of <u>Oregon</u>)) ss.

County of <u>Clackamas</u>)

Signed and sworn to (or affirmed) before me this _____ day of _______, ____, ____, ____, ____, _____,

by Lisa Hanson

Same Lauree Schilperacit Notary Public for



| - Notary Fublic for | |
|------------------------|---------------|
| My commission expires: | March 6, 2020 |
| , , | |

Clackamas Federal Credit Union 18600 SE McLoughlin Blvd Milwaukie, OR 97267

ECEIV

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CLACKAMAS FEDERAL CREDIT UNION |
|---------------------|--------------------------------|
| Jurisdiction* | OREGON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I, MARY GRECO

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this Inot to exceed 175h affidavit: None
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] ___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ [insert title] of the entity claiming [✓] is the CHIEF EXECUTIVE OFFICER exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of

County of

by

) ss.

Signed and sworn to (or affirmed) before me this <u>444</u> day of <u>(</u> TYPCD Notary Public for

My commission expires:

OFFICIAL STAMP DAWN MARIE ANDRADE NOTARY PUBLIC - OREGON COMMISSION NO. 946575 MY COMMISSION EXPIRES JANUARY 26, 2020



DEFRATINGENTOOFJUISSTORE PROPILIAAND LEGAAI

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CMG Mortgage, Inc., dba CMG Financial |
|---------------------|---------------------------------------|
| Jurisdiction* | Contra Costa County |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Melissa L. Richards</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [X] is the <u>Beneficiary</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mili PRiled

(Signature)

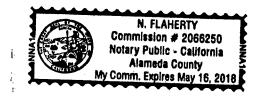
State of _____)) ss. County of _____) Signed and sworn to (or affirmed) before me this _____ day of _____ See attached by Notary Public for My commission expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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.

| State of California |) |
|-------------------------------|--|
| County of Contra Costa | _) |
| On 4/13/2017 before me, | N. Flaherty, Notary Public, Here Inservame and Title of the Officer |
| Date | Here Insert Name and Title of the Officer |
| personally appeared Melissa L | Richards |
| | Name(s) of Signer(s) |

who proved to me on the basis of satisfactory evidence to be the person(a) whose name(a) is/are subscribed to the within instrument and acknowledged to me that be/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(a) 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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Aublic

Place Notary Seal Above

· OPTIONAL ·

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

| Description of Attached Document Title or Type of Document: <u>OR-Bene frame Examples</u> pocument Date: <u>4(13/2017</u> Number of Pages: Signer(s) Other Than Named Above: | | | |
|--|-----------------------------------|--|--|
| Capacity(ies) Claimed by Signer(s) Signer's Name: | Signer's Name: | | |
| Corporate Officer – Title(s): | Corporate Officer - Title(s): | | |
| 🗆 Partner — 🖾 Limited 🛛 🖾 General | 🗋 Partner — 🦷 Limited 🛛 🖾 General | | |
| Individual | Individual I Attorney in Fact | | |
| Trustee Guardian or Conservator | Trustee Guardian or Conservator | | |
| Other: | Other: | | |
| Signer Is Representing: | Signer Is Representing: | | |

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Colonial Savings, F.A. 2626 West Freeway Fort Worth, Texas 76102 Attn: Lisa Miller



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Colonial Savings, F.A. |
|---------------------|------------------------|
| Jurisdiction* | Texas |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Bil Piper (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>-0-_____[not to exceed 175];</u>

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Assistant Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| WIFE | |
|--|--------|
| (Signature) | |
| State of <u>Texas</u>) | |
|) ss. | |
| County of <u>Tarrant</u>) | |
| Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>March</u> | , 2017 |
| by Bil Piper, Assistant Vice President, | • |
| YWV | |
| LIZ CROY Notary Public for State of Texas at Large | • |
| Notary Public My commission expires | |
| STATE OF TEXAS My comm. Exp. Sept. 13, 2017 | |
| | |

Lending Solutions Columbia Credit Union PO Box 324 Vancouver, WA 98666



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Columbia Credit Union |
|---------------------|-----------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Steven Epling</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>AVP Lending Solutions</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

State of

(Signature)

County of Day Signed and sworn to (or affirmed) before me this Ko day of Curnery by ____ Carlee Clark Notary Public for Noncour NOTARY My commission expires: ATE OF WA Mining OF WAS

AFTER RECORDING, RETURN TO: Erich M. Paetsch, OSB# 993350 Saalfeld Griggs PC P. O. Box 470 Salem, Oregon 97308-0470 Telephone: (503) 399-1070

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| LENDER/BENEFICIARY: | Columbia State Bank |
|---------------------|--|
| JURISDICTION: | WASHINGTON STATE CHARTERED COMMERCIAL BANK |

I, Cecilia Kakela, Assistant Vice President, Regional Operations Manager for Columbia State Bank being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under ORS 86.726(1)(b).

1. The above named entity, Columbia State Bank, commenced or caused an affiliate or agent to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: Five (S);

2. The undersigned further certifies that she is the Assistant Vice President, Regional Operations Manager for Columbia State Bank, the entity claiming exemption from requirements established under ORS 86.726(1)(b), and is authorized by such entity to execute this affidavit on its behalf.

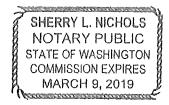
DATED this day of January, 2017.

Centra

Columbia State Bank By: Cecilia Kakela Its: Assistant Vice President, Regional Operations Manager

STATE OF WASHINGTON, County of Pierce) ss.

SUBSCRIBED AND SWORN before me on the $(\bigcirc$ day of January, 2017 on behalf of Columbia State Bank by Cecilia Kakela, Assistant Vice President, Regional Operations Manager.



Notary-Public for Washington My commission expires: \mathcal{W}_{4}

EXEMPTION AFFIDAVIT (2017)

4820-3057-6959, v. 2

ł

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Be | neficiary: | Community Bank |
|-----------|------------|----------------|
| Jurisdi | ction* | WA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Bennett H. Goldstein (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>_______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the attorney [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Multnomah</u>) Signed and sworn to (or affirmed) before me this <u>M</u> day of <u>February</u>, <u>2017</u> by <u>Bennett H. Goldstein, Attorney</u> Notary Fublic for <u>Oregon</u> Notary Fublic for <u>Oregon</u> My commission expires: <u>Dec. 08,2019</u> My commission NO. 945110 MY COMMISSION NO. 945110 MY COMMISSION NO. 945110

đ,

RECEIVED

Compass Bank Attn: Dina Culberson 8080 North Central Expressway - 2nd Floor Dallas, Texas 75206

> DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Compass Bank | |
|---------------------|---------------------|--|
| Jurisdiction* | Blrmingham, Alabama | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Dina Culberson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 _____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Culherson

State of TEXAS)

) ss. County of <u>DALLAS</u>) Signed and sworn to (or affirmed) before me this <u>241H</u> day of <u>JANUARY</u>, <u>2017</u> by <u>DINA</u> <u>WIBERSON</u> MELODY MASSEY Notary Public for <u>TEXAS</u> My commission expires: <u>3-6-17</u> My commission expires: <u>3-6-17</u>

(Signature)

Consolidated Community Credit Union 1033 NE 6th Ave Portland, OR 97232



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Consolidated Federal Credit Unlon |
|---------------------|---|
| Jurisdiction* | federal charterNational Credit Union Administration |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Larry Eillifritz (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

2. The undersigned further certifies that she/he; [check only one of the following boxes]

| [] is the individual claiming exemption from requirements | established under Or Laws 2013, ch 304, or |
|---|--|
| [✓] Is the President/CEO | [insert title] of the entity claiming |
| exemption from requirements established under Or Laws 201 | 13, ch 304, and Is authorized by such entity |
| to execute this affidavit on its behalf. | |

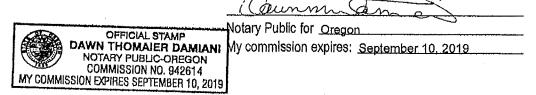
(Signature)

State of Oregon

) ss. County of <u>Multonomah</u>)

 Signed and sworn to (or affirmed) before me this 24th day of January
 , 2017

 by Larry Ellifritz as President/CEO of Consolidated Federal Credit Union
 .



CountryPlace Mortgage, Ltd. Attn: Compliance Dept 15301 Spectrum Dr. Sulte 550 Addison, TX 75001

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lend | ier/Beneficiary: | CountryPlace Mortgage, Ltd |
|------|------------------|----------------------------|
| J | urisdiction* | Texas |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdicilon in which the Lender/Beneficiary is organized.

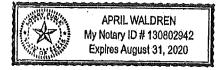
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Vice President of Operations</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature

State of <u>Texas</u>)

County of <u>Dailas</u>) Signed and sworn to (or affirmed) before me this <u>10^{HL}</u> day of <u>January</u>, <u>2017</u> by <u>Casper R. Koble</u>



| | Ċ. | , | | |
|-------------------|-------|-----|----|--|
| anie | Walde | w | | |
| Notary Public for | | |) | |
| My commission e | | | 20 | |
| | | - 1 | | |

CrossCountry Mortgage, Inc. ATTN: Legal Department 6850 Miller Road Brecksville, OH 44141



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | CrossCountry Mortgage, Inc. |]. |
|---------------------|-----------------------------|----|
| Jurisdiction* | Ohio | , |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Ronald J. Leonhardt, Jr. (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [_√_] is the <u>President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

M (Signature) State of Ohio) ss. County of <u>Cuyahoga</u>) Signed and sworn to (or affirmed) before me this $\mathcal{M}^{\mathcal{M}}$ day of January 2017 by Ronald J. Leonhardt, Jr. Otto Notary Public for My commission expires: NA ALEX J. RAGON ATTORNEY-AT-LAW NOTARY PUBLIC - STATE OF OHIO LIFETIME COMMISSION

APPENDIX A TO OAR 137-110-0300

| Aftei | record | ling, re | eturn f | io: |
|-------|--------|----------|---------|-----|
| | | | | |

Robert W. Palmer Lindsay Hart, LLP 1300 SW Fifth Avenue, Suite 3400 Portland, OR 97201-5640

| \square | EC | EIV | Er | Sector Se |
|-----------|-----|----------|-------------|--|
| | IAN | 9.6 2017 | · · Pointer | J |

DEPARTMENT OF JUSTICE -PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Curt Zelmer | |
|---------------------|-------------|---|
| Jurisdiction* | • | • |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Curt Zelmer</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [____] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

t Zelmer (Slonature)

County of Multnomah

Signed and swom to (or affirmed) before me this <u>4</u> day of <u>January</u>, <u>2017</u> by Curt Zelmer

llag Notary Public for Oregon

03. 2019 My commission expires: De um ber





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Danish Rashed, POD the Rashed trust |
|---------------------|-------------------------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Alim Kassam (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [__X_] is the CO-CEO [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | (Signature) |
|--|---|
| State of) | Athas Capital Group, Inc., a California Corporation as Attorney-in-fact |
|) ss. | for DANISH RASHED, POD THE RASHED TRUST |
| Signed and sworn to (or affirmed) before m | ne this day of |
| by | · |
| | See altached CA Jurat Certificate |
| | Notary Public for |
| | My commission expires: |

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

See Attached Document (Notary to cross out lines 1-6 below) See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 2 (if any) St. Document Signer No. 1 anature. S 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. Subscribed and sworn to (or affirmed) before me State of California County of Los Angeles on this <u>27</u> day of <u>June</u>, 20<u>17</u>, by <u>Date</u> <u>Month</u> Year YUKI BISCHOFF Alin Kassam (1) Notary Public - California Los Angeles County Commission # 2151023 (and (2) Name(s) of Signer(s) My Comm. Explres Apr 28, 2020 proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. YUKI BISCHOFF Notary Public - Galifornia Los Angeles County Signature____ Commission # 2151023 Signature of Notary Public My Comm. Expires Apr 28, 2020 Seal Place Notary Seal Above - OPTIONAL -Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document *Prepart Foreclosure Avoidance Program* Title or Type of Document: <u>Beneficiery Exemption Affidavit</u> Document Date: <u>No Date</u> Number of Pages: <u>2</u> Signer(s) Other Than Named Above: ______

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Michael T. Davls 12220 SW First Street Beaverton, OR 97005

DEPARTMENT OF EGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | David J. Kocer and Ann L. Kocer |
|---------------------|---------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other junsdiction in which the Lender/Beneficiary is organized.

i, Michael T. Davis (printed name) being first duly sworn, depose, and state that:

This affidavit Is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [*insert title*] of the entity claiming [/] is the attorney exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on Its behalf.

(Signature)

State of <u>Oregon</u>

County of <u>Washington</u>)

) ss.

Signed and sworn to (or affirmed) before me this <u>5</u>th day of <u>January</u>, <u>2017</u> by <u>Michael T. Davis</u>

Notary Public for My commission expires:





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | David | W. Tiller | |
|---------------------|-------|--|---|
| Jurisdiction* | | and the second | 1 |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, DOVID W. TINCYU (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon

Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>NONE</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [X] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [] Is the _______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Davi win Signature)

State of Oregon

County of <u>Linn</u>) Signed and sworn to (or affirmed) before me this <u>11th</u> day of <u>February</u>, <u>2017</u> by <u>David</u> W. Tillery

| I III | OFFICIAL STAMP |
|--------------|--|
| (ASSAN | JAMES HENRY SKINNER |
| (*(******)°) | NOTARY PUBLIC - OREGON |
| | COMMISSION NO. 933542 |
| | AY COMMISSION EXPIRES JANUARY 06, 2019 |

) ss.

| James Henry C- |
|---------------------------------|
| Notary Public for Oregon |
| My commission expires: 1/4/2019 |
| |



Olin & Associates, Attorneys at Law PO Box 7530 Brookings, OR 97415

> DEPARTMENT OF JUSTICE PORTLAND LEGAL

MAR 07 2017

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Deborah Walbet |
|---------------------|----------------|
| Jurisdiction* | |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Deborah Walbel (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: None [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

boral Warked

(Signature)

State of <u>Oregon</u>)) ss.

County of Curry

Signed and sworn to (or affirmed) before me this 2011 day of Fernun 1, 2017 by Deborah Walble



| Notary Public for <u>Oregon</u> | |
|--------------------------------------|--|
| My commission expires: Aug. 18, 2011 | |
| | |

OREGON FORECLOSURE AVOIDANCE PROCEAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lend | er/Beneficiary: | DEUTSCHE BANK NATIONAL TRUST COMPANY, AS CERTIFICATE TRUSTEE ON BEHALF OF BOSCO CREDIT II TRUST SERIES 2010-1 |
|------|-----------------|--|
| Jı | urisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Glenn Murphy, SVP, Servicer for Beneficiary (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or $[\checkmark]$ is the <u>SVP. Servicer for Beneficiary</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of N SS. County of 3 day of JUN Signed and sworn to (or affirmed) before me this by Notary Public for NJ My commission expires: ų, MELISSA OLIVERA NOTARY PUBLIC STATE OF NEW JERSEY ID # 50020649 MY COMMISSION EXPIRES AUG. 4, 2020



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | DEUTSCHE BANK NATIONAL TRUST COMPANY, AS CERTIFICATE TRUSTEE ON BEHALF OF BOSCO CREDIT II TRUST SERIES 2010-1 |
|---------------------|--|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

]. Gienn Murphy, SVP, Servicer for Beneficiary ___ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this Inol to exceed 175]; affidavit: 1
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming [] is the SVP, Servicer for Beneficiary exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) **Glenn Murphy** State of N Senior Vice President) SS. County of Signed and sworn to (or allirmed) before me this $\underline{\mathscr{A}}$ (017 day of MARPH ICA ViQ NRY by (LON Notary Public for My commission expires: MELISSA OLIVERA NOTARY PUBLIC STATE OF NEW JERSEY ID # 50020649 MY COMMISSION EXPIRES AUG. 4, 2020

Stayton Law P O Box 248 Stayton OR 97383

DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Diane M. Koenig |
|---------------------|-----------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Diane M. Koenig (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [XX] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>) ss.

County of Marion

Signed and sworn to (or affirmed) before me this $\frac{20}{20}$ day of Diane M. Koenig bv

Notary Public for



My commission expires: _______

Oregon

2017

Discover Bank 2500 Lake Cook Rd. Building 1, Attn: Roberta Murphy Riverwoods, IL 60015



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Discover Bank |
|---------------------|---------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Victor Chen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>zero (0)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [✓] Is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>Director, Product Management, Home Equity</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of IL

County of Lake) ss.

Signed and sworn to (or affirmed) before me this 23 day of January , 2017



Notary Public for ______ My commission expires: _Scpt.16, 2019

Joan D. Ickes Senior Vice President Dollar Bank, FSB 300 W Tuscarawas St Canton, Ohio 44702



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Dollar Bank, Federal Savings Bank |
|---------------------|-------------------------------------|
| Jurisdiction* | USA (Dollar is federally chartered) |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, ______ Joan D. ickes _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ________ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or

 [___] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

 State of Ohio
)

) ss.

 County of <u>Stark</u>
)

Signed and sworn to (or affirmed) before me this <u>5th</u> day of <u>January</u>, <u>2017</u> by <u>Joan D. Ickes, Senior Vice President</u>.

Notary Public for Manna Maleet My commission expires: _________



Marlanne Malcuit Notary Public, State of Ohio My Commission Expires February 02, 2021

Steven D. Gerttula, Attorney 416 Bond Street Astoria, OR 97103



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Donald Jester and Arlene Jester |
|---------------------|---------------------------------|
| Jurisdiction* | n/a |

*If Lender/Beneficiary is not a natural person, provide the state or other junsdiction in which the Lender/Beneficiary is organized.

I, Donald Jester (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Zero (0)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [√] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Sjgnature)

State of <u>Washington</u>)

County of <u>LEWIS</u>) Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>November</u>, <u>2016</u> by <u>Donald Jester</u>



) ss.

Notary Public for <u>Washington</u> My commission expires: <u>1-1-2017</u>

Cassie K. Jones Gleaves Swearingen LLP P.O. Box 1147 Eugene, OR 97440

) E C E I V [

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Douglas R. Schultz |
|---------------------|--------------------|
| Jurlsdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Douglas R. Schultz (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [X] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Douglas R. Schultz

State of Oregon

) ss.

County of Lane

Signed and sworn to (or affirmed) before me this <u>23rd</u> day of <u>January</u>, <u>2017</u> by <u>Douglas R. Schultz</u>

Notary Rublic for 23/19 My commission expires:



1111 01 2017

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | EAGLE HOME MORTGAGE, LLC |
|---------------------|--------------------------|
| Jurisdiction* | FLORIDA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, VIRGINIA CASAGRANDE (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Inot to exceed 175</u>;
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [__] is the <u>V.P. CONTROLLER</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Elbrida

) ss. County of <u>Rnellas</u>) Signed and sworn to (or affirmed) before me this <u>33</u> day of <u>June</u>, <u>2017</u> by <u>Virginia</u> <u>Casagrande</u> <u>Diana Valeria Procton</u> My commission #FF 948153 EXPIRES: January 5, 2020 Bonded Thru Notary Public Underwriters

| <u>After reco</u> r | <u>ding, return to:</u> | TYDET ONVILLE BOLLSON AD LINEWLEVALED UPPEFEB 17 2017 DEPARTMENT OF JUSTICE |
|--|--|--|
| | OREGON F BENEFI | CIARY EXEMPTION AFFIDAVIT |
| | Lender/Beneficiary: | East Rock Financial, LLC |
| | Jurisdiction* | Arizona |
| <u>, </u> | | provide the state or other jurisdiction in which the Lender/Beneficiary is organized. |
| 1, <u>Jos</u> | iph Schillinger | (printed name) being first duly sworn, depose, and state that: |
| sale u affida 2. The u [] exem | Inder ORS 86.752 or by s vit: <u>20</u> [not Indersigned further certific is the Individual claiming is the | mber of actions to foreclose a residential trust deed by advertisement and suit under ORS 88.010 during the calendar year preceding the date of this to exceed 175]; es that she/he: [check only one of the following boxes] exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming established under Or Laws 2013, ch 604 and is authorized by such entity behalf. |
| State of | rizona) | (Signature) |
| County of <u>M</u> Signed and su by |) ss. <u>Lintcopic</u>) worn to (or affirmed) befor <u>Josepk</u> <u>A.</u> Sch JAMES LOGGINS Notary Public - Arizona Maticopa County My Commission Expires December 23, 2017 | Notary Public for <u>Marcupe</u> County, <u>Arrzona</u> My commission expires: <u>Peccento</u> 23, 2017 |

÷

*

Mary K. Romans Eastern Savings Bank, fsb 11350 McCormick Road, EP 2, Suite 200 Hunt Valley, Maryland 31031



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Eastern Savings Bank, fsb |
|---------------------|--|
| Jurisdiction* | Federal Bank, organized under laws of the United Stats |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Chris Johnson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Maryland

County of <u>Baltimore</u>) Signed and sworn to (or affirmed) before me this <u>17th</u> day of <u>Janauary</u>, <u>2017</u> by <u>Chris Johnson, Senior Vice President of Eastern Savings Bank, fsb</u>. <u>Mary W. Channes</u> Notary Public for _____

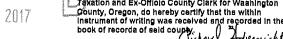
My commission expires: July 21, 2018

MARY K. ROMANS Notary Public-State of Maryland Baltimore County, My Commission Expires July 21, 2018

) ss.

Roger K. Harris Harris Berne Christensen LLP 5000 Meadows Road, Suite 400 Lake Oswego, OR 97035





D-MAE

Richard Hobernicht, Director of Aseessment and Texation, Ex-Officio County Clerk

Richard Hobernicht, Diractor of Aeseasment and exation and Ex-Officio County Clark for Waahington

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2017-024485

Washington County, Oregon

03/27/2017 02:20:59 PM

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | | Entrust Administration Trust FBO Janet Trump IRA #39-10571 | |
|---------------------|---------------|--|--|
| | Jurisdiction* | California | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Maria Corpuz (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 ____ [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_X] is the <u>Authorized Signer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of) ss.

County of Alameda) Signed and sworn to (or affirmed) before me this 3rd day of MarchMaria by _____ COTDU Notary Public fo **IRENA VANN** COMM. #2039369 My commission expires: lotary Public - California **Alameda County** Comm. Expires Sep. 23

Evergreen Federal 969 S.E. 6th Street Grants Pass, OR 97526



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Evergreen Federal Bank |
|---------------------|------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Kris Woodburn</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Three (3)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mm

(Signature)

State of <u>Oregon</u>)

County of <u>Josephine</u>) Signed and sworn to (or affirmed) before me this <u>for a day of January</u>, <u>2017</u> by <u>Kris Woodburn, Senior Vice President of Evergreen Rederal Bank</u>.



Notary Public for <u>Oregon</u> My commission expires: <u>November 29, 2020</u>

Evergreen Federal 969 S.E. 6th Street Grants Pass, OR 97526



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Evergreen Federal Savings and Loan Association |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Kris Woodburn (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Three (3)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature)

State of <u>Oregon</u>)

County of <u>Josephine</u>) Signed and sworn to (or affirmed) before me this _____ day of <u>January</u>, <u>2017</u> by <u>Kris Woodburn, Senior Vice President of Evergreen Federal Savings and Joan Assoc</u>.



Notary Public for <u>Oregon</u> My commission expires: <u>November 29, 2020</u>

Loan Servicing Evergreen Home Loans 15405 SE 37th Street, Suite 200 Believue, WA 98008

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Evergreen Moneysource Mortgage Company dba Evergreen 🕌 | | |
|---------------------|--|--|--|
| Jurisdiction* | Washington | | |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized. .

I, Shelley Warhol (printed name) being first duly swom, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [____] is the <u>Controller</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

mwart

State of <u>WA</u>)) ss. County of <u>Kiing</u>) Signed and sworn to (or affirmed) before me this <u>2041</u> day of <u>AUUARY</u>, <u>2017</u> by <u><u>Offectivesous</u>, <u>1000</u> by <u><u>Offectivesous</u>, <u>1000</u> by <u><u>Offectivesous</u>, <u>2017</u> Notary Public for <u><u>Offectivesous</u>, <u>2017</u> Notary Public for <u><u>Offectivesous</u>, <u>2017</u> Wy commission expires: <u>03.35.17</u></u></u></u></u></u>

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Fairway Fund V, LLC |
|---------------------|---------------------|
| Jurisdiction* | Oregon |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Matthew W, Burk (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

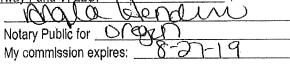
 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>Authorized Signor</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

County of <u>Washington</u>) Signed and sworn to (or affirmed) before me this <u>3rd</u> day of <u>January</u>, <u>2017</u> by <u>Matthew W. Burk, Authorized Signor for Fairway Fund V, LLC,</u>





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Fairẃay Fund V, LLC |
|---------------------|---------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Matthew W. Burk (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 ______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Authorized Signor</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mitt who Br

(Signature)

State of <u>Oregon</u>)

County of <u>Washington</u>)
Signed and sworn to (or affirmed) before me this <u>3rd</u> day of <u>January</u>, <u>2017</u>
by <u>Matthew W. Burk, Authorized Signor for Fairway Fund V. LLC.</u>

| male | sentin |
|-----------------------|---------|
| Notary Public for _O | MOLT |
| My commission expires | 8-27-19 |
| | |



David W. Criswell **Ball Janik LLP** 101 SW Main St Ste 1100 Portland, OR 97204



DEPARTMENT OF JUSTICE JUSTICE PORTEANOLEGALIND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | FB Acquisition Property XVIII, LLC | |
|---------------------|------------------------------------|--|
| Jurisdiction* | Colorado | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized. Robert S. Pussell

____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 7. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: $3 - 2 - 3 - 1 \rightarrow 0$ [not to exceed 175];
- 2. The undersigned further certifies that she/he: *Icheck only one of the following boxes*] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the Vice President _ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of ______do

County of Ava

| Signed and sworn to (or a | affirmed) before me this _ | <u>23</u> day of _ | March | 2017 |
|---------------------------|----------------------------|--------------------|-------|------|
| by Robert S. Po | 81ehl | | + | |

LISA M HULL NOTARY PUBLIC STATE OF COLORADO NOTARY ID # 20024004007 MY COMMISSION EXPIRES JUNE 25, 2017

Notary Public for <u>State of Colorado</u> My commission expires: <u>June</u> 28, 2017

Fibre Federal Credit Union Attn: Norma Mckittrick PO Box 1234 Longview, WA 98632



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Flbre Federal Credit Union |
|---------------------|----------------------------|
| Jurisdiction* | Washington & Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Norma Mckittrick (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>5</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the Member Solutions Manager [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature)

State of Washinton)

County of Cowlitz

Signed and sworn to (or affirmed) before me this <u>1046</u> day of <u>chanciany</u>, <u>2017</u> by <u>Norma McLittnck</u>



) ss.

Notary Public for My commission expires:

Fifth Third Bank Attn: Ben Twehues 38 Fountain Square Plaza MD:10AT76 Cincinnati, OH 45263



DEPARTMENT OF JUSTICE OREGON FORECLOSURELAVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Fifth Third Bank |
|---------------------|------------------|
| Jurisdiction* | Cincinnati, OH |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Glenn Meadows (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Senior Vice President, Mortgage Default and Mitigation</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Slanature)

State of <u>Ohio</u>)) ss.

County of <u>Hamilton</u>)
Signed and sworn to (or affirmed) before me this <u>/////</u> day of <u>January</u>, <u>2017</u>
by <u>Glenn Meadows</u>

Notary Public for My commission expires:



MICHAEL YANKULOV Notary Public, State of Ohio My Commission Expires May 18, 2020

Fifth Third Bank Attn: Ben Twehues 38 Fountain Square Plaza MD:10AT76 Cincinnati, OH 45263

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Fifth Third Mortgage Company |
|---------------------|------------------------------|
| Jurisdiction* | Cincinnati, OH |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Glenn Meadows (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____2 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Senior Vice President, Mortgage Default and Mitigation</u> [insert fille] of the entity claiming exemption from requirements established under Of Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature)

State of <u>Ohio</u>)) ss.

County of <u>Hamilton</u>) Signed and sworn to (or affirmed) before me this <u>//+/</u> day of <u>January</u>, <u>2017</u> by Gienn Meadows

Notary Public for Ohio My commission expires:



MICHAEL YANKULOV Notary Public, State of Ohio My Commission Expires May 18, 2020

Tomasi Salyer Martin 121 SW Morrison St. Suite 1850 Portland OR 97204

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | First Community Credit Union |
|---------------------|------------------------------|
| Jurisdiction* | OREGON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jeanne Brooks (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>5</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

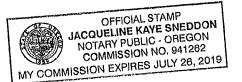
[__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the <u>Vice President of Credit Quality</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signafure)

State of Oregon)

County of <u>COOS</u>) Signed and sworn to (or affirmed) before me this <u>10</u> day of <u>Sanuary</u>, <u>2017</u> by <u>Jeanne</u> <u>Brooks</u>, <u>VP of Credit Quality</u>.

Notary Public for First Community lit Union My commission expires: _____





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | First Guaranty Mortgage Corporation | |
|---------------------|-------------------------------------|--|
| Jurisdiction* | Virginia | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

Dana Powell (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>six (6)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [♥] is the <u>AVP Default Quality Assurance</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

ena torvell

My commission expires: Detaber

(Signature)

State of North Carolina)

) ss. County of Mecklenburg) Signed and sworn to (or affirmed) before me this 27th day of <u>February</u>, 2017 by <u>Dana Poulu</u>, 2017 <u>Dana Poulu</u> Notary Public for <u>Meckley Ducco</u> (cound

JESSICA H LUSK Notary Public, North Carolina Macktenburg County My Commussion Expires October 20, 2020

First Republic Bank ATTN: Special Assets 111 Pine Street San Francisco, CA 94111



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | First Republic Bank |
|---------------------|---------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Edward J. Dobranski (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Secretary</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, sh 304, and is authorized by such entity to execute this affidavit on its behalf.

| 9-18- |
|--|
| (Signature) |
| State of <u>California</u>) |
|) ss. |
| County of <u>San Francis</u> do |
| Signed and sworn to (or affirmed) before me this day of,,, |
| by |
| |
| Notary Public for |
| My commission expires: |
| SEE ATTACHED |

GOVERNMENT CODE § 8202 CALIFORNIA JURAT WITH AFFIANT STATEMENT See Attached Document (Notary to cross out lines 1-6 below) □ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 2 (If any) Signature of Document Signer No. 1 A notary public or other officer completing this certificate verifles only the identity of the individual who signed the document to which this certificate is attached, and not the truthfuiness, accuracy, or validity of that document. Subscribed and sworn to (or affirmed)- before me State of Callfornia County of SAN FRAN day of JANNA on this by (1) FDW# (and (2) Name(s) of Signer(s) M. V. CESAR Commission # 2099674 proved to me on the basis of satisfactory evidence Notary Public - California to be the person(s) who appeared before me. San Francisco County My Comm. Expires Feb 9, 2019 Signature Signature of Notary Public Seal Place Notary Seal Above **OPTIONAL** Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document: BENEFICIARY EXEMPTION AFTIDAXIT Document Date: NO DATE Number of Pages: INE_Signer(s) Other Than Named Above: NO DEER SANERS

©2014 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5910

First Technology Credit Union PO Box 2100 Beaverton, OR 97075-2100 Attn: Special Assets Management

State of <u>Dreads</u>



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | First Technology Federal Credit Union |
|---------------------|---------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Mark Bacu (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>18</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Senior Forecloure Specialist</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

O) ss. County of <u>Washington</u> Signed and sworn to (or affirmed) before me this <u>3rd</u> day of <u>January</u>, <u>2017</u> by <u>Mark Bacu</u> <u>Mark Creditolunion</u> <u>Mark S, 2017</u>



APPENDIX A TO OAR 137-110-0300

After recording, return to:

State of

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | | | Association, suco Home Loan Corpo | |
|-------------------|-----------|---|--------------------------------------|---|
| Jurisdiction* | Tennessee | - | | 7 |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Hmy MCKamey (printed name) being first duly sworn, depose, and state that:

This affidavil is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

nature)

) ss. County of <u>Knok</u>) Signed and sworn to (or affirmed) before me this <u>18</u>th day of <u>January</u>, ²⁰¹⁷ by <u>Amy McKamey</u>

Notary Public for My commission expires:





APPENDIX A TO OAR 137-110-0300

After recording, return to:

State of

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | First Tennessee Bank National Association |
|---------------------|---|
| Jurisdiction* | Tennessee |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized,

I, <u>Hny MCKany</u> (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[___] is the <u>VICL President</u> [insert title] of the entity claiming exemption from requirements established under On Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

) \$\$. County of KNW Signed and sworn to (or affirmed) before me this 18th day of s 2017 anua Amis MCLAMPS by_ Notary Public for Along My commission expires: MIMIN STATE OF TENNESSEE NOTARY PUBLIC

OUNISSION EXPIRES



DEPARTMENT OF JUSTICE PORTLAND LEGAL

After recording, return to:

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Flagstar Bank, FSB |
|---------------------|--------------------|
| Jurisdiction* | Michigan |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Bella khars (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affillate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>12</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the Bank Officer *linsert title* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. **Bella Kharson**

(Signature)

State of

by_

MICHIGAN OAKLAND

County of

Notary Public for

My commission expires:

Mosay Public, State of Michigan County of Wayne Ab, Commission Expires 1/21/2018 Acting in Opkland Qounty, Mi

Signed and sworn to (or affirmed) before me this 1/5/ day of

Florence Habitat for Humanity PO Box 3302 Florence, Oregon 97439



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Florence Habitat for Humanity, Inc | |
|---------------------|------------------------------------|--|
| Jurisdiction* | State of Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Katherine A. McBroom-Redwine (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 2 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_✓] is the Executive Director [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

Notary Public for My commission expires: 1m OFFICIAL STAMP EN LOUISE ROBISON EARNSMAW **NOTARY PUBLIC-OREGON** COMMISSION NO. 936693

MY COMMISSION EXPIRES MARCH 05, 2019

Law Office of Matthew G. Shepard 345 Lincoln St. SE Salem, OR 97302

DEPARTMENT OF JUSTICE OREGON FORECLOSUREPAVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Flynn D. Case,TTEE of the Flynn D. Case Trust dated 5/3/1996 |
|---------------------|--|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Flynn D. Case (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 1______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | LE Cope |
|--|----------------|
| (Signature) | |
| State of <u>OREGON</u>) | |
|) ss. | |
| County of Marlon) | |
| Signed and sworn to (or affirmed) before me this \coprod^{+h} day of \underline{N} | lay, 2017 |
| by Flynn D. Case, Trustee of the Flynn D. Case Living Trust date | |
| > | Stolman |
| Notary Public for | 510011 |
| My commission ex | pires: 9112020 |







Steve Druckenmiller - County Clerk

records.

\$65.00

After recording, return to:

Elljah R.L. Brown Attorney at Law PO Box 667 Albany, OR 97321

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Frances N. Babcock |
|---------------------|--------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: | Frances N. Babcock

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes] [1] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming 1 Is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Frances The Balance (Signature)

State of Oregon) ss.

Section in a

County of Linn , 2017 Signed and sworn to (or affirmed) before me this 2nd day of March by Frances N. Babcock

istri

Notary Public for dream My commission expires: 1/30/2018



AFFIDAVIT OF FILING BENEFICIARY EXEMPTION AFFIDAVIT WITH ATTORNEY GENERAL'S OFFICE

STATE OF OREGON

County of Multnomah

)) ss.)

I, Alisa D. Hardy, being first duly sworn, depose and say:

The attached Beneficiary Exemption Affidavit is a true and correct copy of the Beneficiary Exemption Affidavit that was filed with the Oregon Attorney General on March 1, 2017 on behalf of Point Property Management, LLC pursuant to OAR 137-110-0300.

Alisa D. Hardy, OSB No. 105886 Successor Trustee Signed and sworn to before me on this 187 day of March, 2017, by Alisa D. Hardy.



Notary Public for Oregon My Commission Expires: 05

1:\10676\0001\Pleadings\Affidavlt of Filing Beneficiary Exemption Aff.docx

Franklin American Mortgage Company Attn: Director of Servicing 6100 Tower Circle, Suite 600 Franklin, TN 37067

| \square | EC | | W | EN |
|-----------|-----|----|------|----|
| \square | JAN | 12 | 2017 | U |

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Franklin American Mortgage Company |
|---------------------|------------------------------------|
| Jurisdiction* | Tennessee |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Michael J. Sweklo, Senior Vice President (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>twenty nine (29)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under of Laws 2013, ch 304, or
 [__] is the <u>Senior Vice President -- Director of Servicine</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is buthorized by such entity to execute this affidavit on its behalf.

State of <u>Tennessee</u>)) ss. County of <u>Williamson</u>) Signed and sworn to (or affirmed) before me this <u>12th</u> day of <u>January</u>, <u>2017</u> by <u>Julie Smith</u> <u>Muil Smith</u> Notary Public for <u>Franklin American Mortgage Co.</u> My commission expires: <u>My Commission Expires</u> January 13, 2020

APPENDIX A TO OAR 137-110-0300

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Freedom Mortgage Corporation |
|---------------------|------------------------------|
| Jurisdiction* | New Jersey |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| I | Jared Huffman | (printed name) being first duly sworn, depose, and state that: |
|----|---------------|--|
| ч, | | (printed name) sents indianal energy appendix |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named Individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____94 ____[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or Vice President [Insert title] of the entity claiming [x1 is the exemption from requirements established under Or Laws 2013, ch 304, and Is authorized by such entity to execute this affidavit on its behalf. State of T) ss. County of Hamilton) Signed and sworn to (or affirmed) before me this 17 day of January by <u>Lared</u> Huffman nisting Olvera Notary Public for Hamilto Co My commission expires: 4/18/2024



After recording, return to:

10500 Kincaid

Attn: Jared

Frenclam Mortyage Corporation

Huffman

Fishers, IN 46037

Gesa Credit Union 51 Gage Blvd Richland, WA 99352

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Gesa Credit Union |
|---------------------|-------------------|
| Jurisdiction* | Washington State |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Brett Jorgenson (printed name) being first duly swom, depose, and state that:

This affidavit is submitted for a cialm of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>-0-_____[not to exceed 175]</u>,
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Chief Lending Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Wathington

County of <u>Benton</u>) SIgned and sworn to (or affirmed) before me this <u>1174</u> day of <u>January</u> <u>2017</u> by <u>Brett Surgensen</u>



Was Notary Public for My commission expires:

| DECEIVED |
|--|
| RECEIVED |
| AFTER RECORDING RETURN TO: |
| Gina L. Bonomini, OSB #032260, Successor Trustee Randy C. Rubin, Attorney at Law, P.C. 836 W. Military, Suite 206 Roseburg, OR 97471 |
| Grantor: Grantees/Beneficiaries |
| Danny S. ClarkBetty LottFreda Dombo231 Marilyn StreetP.O. Box 2852542 Provence DriveRoseburg, OR 97470Oakland, OR 97462Yuba City, CA 95993 |
| Amended BENEFICIARIES EXEMPTION AFFIDAVIT |
| STATE OF OREGON) |
|) ss. County of Douglas) |
| |
| l, Gina L. Bonomini, Of Attorneys for the Beneficiaries, being first duly sworn, depose, and state that: |
| 1. This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, Chapter 304, §2(1)(b). |
| 2. The above named Beneficiaries are individuals claiming an exemption |
| from the requirements established under OR Laws 2013, Chapter 304 and commenced or caused |
| an affiliate or agent of the individuals to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 |
| during the calendar year preceding the date of this affidavit: <u>0</u> ; |
| DATED this <u>5</u> day of January, 2017. |
| RANDY C. RUBIN ATTORNEY AT LAW, P.C. |
| A is . |
| By: <u>Jenalovini, OSB #032260</u> |
| Of Attorneys for Beneficiaries and Successor Trustee |
| |
| Subscribed and Sworn to before me by Gina L. Bonomini on this 5 day of January, 2017. |
| OFFICIAL STAMP AMANDA JEAN BRESHEARS |
| NOTARY PUBLIC-OREGON NOTARY Public for Oregon |
| MY COMMISSION EXPIRES SEPTEMBER 23, 2019() |
| Page 1 – Amended BENEFICIARY EXEMPTION AFFIDAVIT |
| |
| |

Stephen Mountainspring Attorney at Law P.O. Box 1205 Roseburg, Oregon 97470



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Trustee, Glade P. Friton Revocable Living Trust u/a/d 6/4/08 |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Stephen Mountainspring (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Attorney for the Succesor Trustees</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

OFFICIAL SEAL GLORIA J EGLI NOTARY PUBLIC-OREGON COMMISSION NO. 477334 MY COMMISSION EXPIRES MAY 27, 2017

) ss.

Signed and sworn to (or affirmed) before me this 27th day of March

-)

State of Oregon

County of Douglas

by Stephen Mounainspring

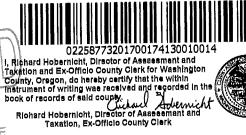
lord Notary Public for Oregon My commission expires: May 27 2017

2017



Walter R. Gowell PO Box 480 McMinnville, OR 97128





Cnt=1 Stn=31 RECORD51

\$5.00 \$5.00 \$11.00 \$20.00 - Total =\$41.00

017-017413

Washington County, Oregon

03/01/2017 11:40:22 AM

D-MAE

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Glenda M. Walters Trust, Glenda M. Walters, Trustee |
|---------------------|---|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Glenda M. Walters, Trustee (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] $\sqrt{1}$ is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ *[insert title]* of the entity claiming 1 is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

My commission expires:

Glenda M. Walters, Truster

(Signature)

State of Oregon) ss.

County of Yamhill

Signed and sworn to (or affirmed) before me this 28 day of February 2017

by Glenda M. Walters, Trustee

Notary Public for Oregon



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une

Guaranty Bank : Attention Josh Wolfgram 4000 W Brown Deer Road Brown Deer, WI 53209



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Guaranty Bank |
|---------------------|---------------|
| Jurisdiction* | Wisconsin |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Josh wolfgram (printed name) being first duly sworn, depose, and state that:

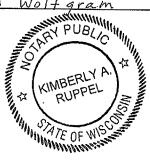
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Assistant Vice President of Guaranty Bank</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Wisconsin)

County of <u>Milwanke</u> Signed and sworn to (or affirmed) before me this <u>bth</u> day of <u>Janwary</u>, <u>2017</u> by <u>Josh Wolfgram</u> <u>Kemberly</u> <u>Ruppel</u> Notary Public for <u>Milwankee</u> County <u>Mission</u>



) ss.

Notary Public for <u>Milwaukee County</u> Wiscons My commission expires: <u>4-9-2018</u>

Guild Mortgage Company Attn: Compliance Department P.O. Box 85304 San Diego, CA 92186



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Gulid Mortgage Company |
|---------------------|------------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Rhona M. Kaninau (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affillate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____24____[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ Senior Vice President [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

SAMA M. GAMIAN

| | (Signature) Rhona M. Kaninau, Senior Vice President |
|---|---|
| State of)) ss. | See attached Notary Acknowledgement (Jurat) 🌾 |
| County of) | |
| Signed and sworn to (or affirmed) before me thi by | s day of ; |
| | Notary Public for |
| | My commission expires: |
| | |

A notary public or other officer completing this certificate verifies only the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF <u>California</u>)) ss. COUNTY OF <u>San Diego</u>)

Subscribed and sworn to (or affirmed) before me on this 12th day of <u>Sanwary</u>, 2017, by <u>Rhona M. Kaninau</u>, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

I. FOOTE Commission # 2143183 Notary Public - California San Diego County My Comm. Expires Mar 12, 2020 (Sea

L. Tost

Signature

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EEMPTION AFFIDAVIT

David M, Blanc. Attorney at Law P.O. Box 218 Pendleton, OR 97801

「UEIVE JAN 26 2017」

PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | HAPO Community Credit Union |
|---------------------|-----------------------------|
| Jurisdiction' | Washington |

If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Araceli Serrano (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 - [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [____] is the <u>Adjuster</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of WASHINGTON

County of Benton)
Signed and sworn to (or affirmed) before me this 25+ day of January , 2017
by Araceli Serrano A

ar i fallender og stære indeleder i fordere og søder helen hellender forskare det er det er se se en se er se s

Dayla Notary Public for Washington. My commission expires: January 29, 2018



) \$3,

Heritage Grove Federal CU 631 Winter Street NE Salem, OR 97301



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Heritage Grove Federal Credit Union |
|---------------------|-------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Blair Conner _____ (printed name) being first duly sworn, depose, and state that:

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 2 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [V] is the <u>Vice President of Lending</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of OVECICV) ss. County of MANCH 1 Signed and sworn to (or affirmed) before me this <u>444</u> day of <u>JOMUAN</u> Conner bv K ONPA Notary Public for // My commission expires: OFFICIAL STAMP **KIANI A JOHNSON** NOTARY PUBLIC - OREGON COMMISSION NO. 941471 MY COMMISSION EXPIRES AUGUST 17, 2019



Servis One, Inc. d/b/a BSI Financial Services Attn: Legal 1425 Greenway Drive, Suite 400 Irving, TX 75038

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | HMC ASSETS, LLC Solely In Its Capacity as Separate Trustee | |
|---------------------|--|--|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Karin Murphy (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>10</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>AVP. Servis One. Inc.. Attorney-in-fact</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

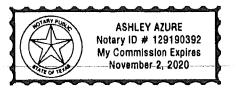
(Sigha

State of <u>TEXAS</u>))) ss.

County of <u>DALLAS</u>)
Signed and sworn to (or affirmed) before me this <u>JU</u> day of <u>JANUARY</u>, <u>2017</u>
by <u>Karin Murphy</u>

Notary Public for

My commission expires:



Form 300 V7/5/13

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DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Home Point Financial Corp. |
|---------------------|----------------------------|
| Jurisdiction* | ORegon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| 1, <u>R</u> e | gina | Benavides | _ (printed r | name) bein | g first duly s | worn, depose | , and state that |
|---------------|------|-----------|--------------|------------|----------------|--------------|------------------|
| • | , | | | • | | • • | • |

(Signature) State of Texas)) ss. County of Dallas) Signed and sworn to (or affirmed) before me this <u>13</u> day of <u>July</u> by <u>Resina</u> <u>Benavides</u> Notary Public for Teras OMAR J. ACOSTA My commission expires: 1(-07-2020 Notary Public, State of Texas Comm. Expires 11-07-2020 Notary ID 130892042

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Homecoming Property LLC | |
|---------------------|-------------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, S. William Lau (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [✓] is the <u>Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

County of <u>Multholman</u> Signed and sworn to (or affirmed) before me this <u>301</u> day of <u>Junvany</u>, <u>2011</u> by <u>Sander William law</u>

Notary Public for My commission expires:



HOMESTREET BANK Attn: Melissa Hjorten 33405 8th Avenue South, Suite 100 Federal Way, WA 98003



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Lender/Beneficiary: | HOMESTREET BANK |
|---|---------------------|-----------------|
| Ī | Jurisdiction* | Wäshington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction In which the Lender/Beneficiary Is organized.

I, Randall Hoffert (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>36 [not to exceed 175];</u>
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Washington</u>)) ss. County of <u>King</u>) Signed and sworn to (or affirmed) before me this <u>9th</u> day of <u>January</u>, <u>2017</u> by <u>Randall Hoffert, Vice President for HomeStreet Bank</u> by <u>Randall Hoffert, Vice President for HomeStreet Bank</u> Notary Public for <u>JrATE</u> OF WASHINGE-TON Notary Public State of Washington JANICE M HANSEN My Appointment Expires Apr 9, 2019

Household Finance Corporation II 1421 W. Shure Drive, Suite 100 Arlington Heights, IL 60004



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Household Finance Corporation II |
|---------------------|----------------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I Marc Giacovelli

(printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[...] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the <u>Vice President, State Regulatory Administration Division</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| · · | Have Siacouth |
|--|--|
| | Signature) |
| State of Illinois) | |
|) ss. County of <u>Dufage</u>) | |
| Signed and sworn to (or affirmed) before me this | ethday of <u>January</u> , <u>2017</u> |
| by <u>Sean E. Case</u> | Y Sully |
| Ν | lotary Public for |
| N | ly commission expires: |
| | OFFICIAL SEAL SEAN E CASEY NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:04/01/17 |

Household Finance Corporation III 1421 W. Shure Drive, Suite 100 Arlington Heights, IL 60004



DEPARTMENT OF JUSTICE OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Household Finance Corporation III |
|---------------------|-----------------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Marc Giacovelli (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] []] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or []] is the <u>Vice President, State Regulatory Administration Division</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | Mare Suncorch- |
|---------------------------------------|--|
| | (Signature) |
| State of <u>Illinois</u>) | |
| County of Dulage) ss. | |
| Signed and sworn to (or affirmed) bef | ore me this ^{9th} day of <u>January</u> , <u>2017</u> |
| by <u>Sean</u> (| E. Lasey OST |
| | - Anly |
| | Notary Public for |
| | My commission expires: |
| | OFFICIAL SEAL SEAN E CASEY NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:04/01/17 |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | HPMC | Solutions | LLC | |
|---------------------|-------|-----------|--------|--|
| Jurisdiction* | Texas | | ****** | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| 1, Matthew | Puchferran | (printed name) being first duly sworn, depose, and state | , that |
|------------|------------|--|--------|
| | | (printed name) being inst duty sworn, depose, and state | i mai. |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];

(Signature)

State of Florida)

) ss. County of <u>Beln beach</u>) Signed and sworn to (or affirmed) before me this <u>1471</u> day of <u>Febarary</u>, <u>2017</u> by <u>Ms t7 hew</u> <u>Signed</u>

Daniel Scott Selis Notary Public for My commission expires: April





DEPARTMENT OF JUSTICE PORTLAND LEGAL OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | HSBC Bank USA, N.A. |
|---------------------|---------------------|
| Jurisdiction* | New York |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| ١. | Melissa Nowicki | (printed name |) being firs | st dulv | sworn, d | epose. | and state t | hat: |
|----|-----------------|---------------|---|---------|----------|--------|-------------|------|
| •• | | 1 | /~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Assisstant Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of New York)

Assistant Vice President

County of <u>Erie</u>)

) ss.

Signed and sworn to (or affirmed) before me this 1st day of March , 2017.

by <u>Melissa Nowicki</u>

Ene Count Notary Public for My commission expires:

Summer Young No. 01YO6287922 Notary Public, State of New York Qualified in Erie County My Commission Expires 8-26-2017

HSBC Mortgage Services Inc. 1421 W. Shure Drive, Suite 100 Arlington Heights, IL 60004

to execute this affidavit on its behalf.



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | HSBC Mortgage Services Inc. |
|---------------------|-----------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Marc Giacovelli (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [...] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the <u>Vice President. State Regulatory Administration Division</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity

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| | Kane Siacovell |
| | (Signature) |
| State of <u>Illinois</u>) | |
|) ss. County of <u>Dupage</u>) | |
| | a me this ^{9th} day of January 2017 |
| Signed and sworn to (or affirmed) befor | |
| by) ea | 1 E. Laser . |
| | In E bay |
| | Notary Public for |
| | My commission expires: $\frac{4}{1/2017}$ |
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| | ÓFFICIAL SEAL |
| | SEAN E CASEY |
| | NOTARY PUBLIC - STATE OF ILLINOIS |
| | MY COMMISSION EXPIRES:04/01/17 |
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DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Trendale Intrivisic Velye Fund LLC |
|---------------------|------------------------------------|
| Jurisdiction* | Galifernia |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
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 [___] is the collect; and form requirements established under Or Laws 2013, ch 304, or
 [____] is the collect; and form requirements established under Or Laws 2013, ch 304, or
 [____] is the collect; and form requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | 12 th / the Henry |
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| | (Signature) |
| State of) | |
|) \$5. | |
| County of) | |
| Signed and sworn to (or affirmed) before r | ne this day of , , |
| by | · · · · · · · · · · · · · · · · · · · |
| | Nation Dublic for |
| | Notary Public for |
| | My commission expires: |
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| ; | CALIFORNIA JURAT WITH AFFIANT STATEMENT GOVERNMENT CODE § 8202 | | |
| | □ See Attached Document (Notary to cross out lines 16 below) □ See Statement Below (Lines 16 to be completed only by document signer[s], <i>not</i> Notary) | | |
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| · • | 6 Signature of Document Signer No. 1 Signature of Document Signer No. 2 (If any) | | |
| | A notary public or other officer completing this certificate verifies only the identify of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. | | |
| | State of Callfornia County of <u>VINTUIA</u> Subscribed and sworn to (or affirmed) before me on this <u>12</u> day of <u>Apiii</u> , 20 <u>17</u> by <u>Date</u> Month Year | · • | |
| | (1) Scott Hallema | | , |
| | Name(s) of Signer(s) | | • |
| | J. ZAHAGOZA Notary Public - California Ventura County Commission # 2147997 My Comm. Expires Mar 31, 2020 | | |
| | Signature | set | • |
| · | Seal Place Notary Seal Above | , | |
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| | Though this section is optional, completing this information can delet an even fraudulent reattachment of this form to an unintended document. | | , |
| | Title or Type of Document: | | • |
| | Number of Pages: Signer(s) Other I nan Named About | | |
| | ©2014 National Notary Association • www.NationalNotary.org • 1-800-USNOTARY (1-800-876-6827) Item #5910 | | |
| | | | • |

IQ Credit Union Attn: Jaci PO BOX 1739 Vancouver, WA 98668



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | IQ Credit Union |
|---------------------|-----------------|
| Jurisdiction* | Washington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is orgenized,

i, Eric Petracca (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Chief Risk Officer/Chief Credit Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of WA

County of <u>Clark</u>) Signed and sworn to (or affirmed) before me this <u>12</u> day of <u>JANVUVU</u>, <u>2D17</u> by <u>EXIC</u> <u>RETVACCO</u>.

) 88.

Notary Public for Van COUVe My commission expires: ______

Russell G. Trump P.O. Box 517 Drain, OR 97435



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Jack Shaw and Jean Ann Shaw |
|---------------------|-----------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Jack Shaw _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

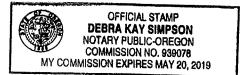
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>one</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [X] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of CREGON)

) ss. County of $\underline{D_{ovg}}$)

Signed and sworn to (or affirmed) before me this $3^{1/2}$ day of _____



Notary Public for My commission expires:

Johnson County My Commission Expires: 4/22/2020 Commission # 12330565

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | James B. Nutter and Company |
|---------------------|-----------------------------|
| Jurisdiction* | Missouri |

*If Lender/Beneficiary is not a natural person, provide the state or other junsdiction in which the Lender/Beneficiary is organized.

|. MIchael Walters _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affillate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 26 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Assistant Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

The hast had

(Signature) Michael Walters, Assistant Vice President



Joseph E. Kellerman Hornecker Cowilng LLP 14 N. Central Ave., Suite 104 Medford, OR 97501

GINA MARIE RYAN NOTARY PUBLIC-OREGON COMMISSION NO. 935876 MY COMMISSION EXPIRES JANUARY 28, 2019 DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | James W. Christopherson and Heien M. Christopherson, husb |
|---------------------|---|
| Jurisdiction* | Jackson County |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized,

i, Joseph E. Kellerman (printed name) being first duly sworn, depose, and state that:

- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the legal representative [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signatúre) State of Oregon) ss. County of Jackson Signed and sworn to (or affirmed) before me this Who day of lerman by Josep Notary Public for readn My commission expires: -OFFICIAL STAMP



Antoine J. Tissot Toole Carter Tissot & Coats LLP 112 West 4th Street The Dalles OR 97058



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | James Webber II and Keenan Webber |
|---------------------|-----------------------------------|
| Jurisdiction* | State of Oregon/Gilliam County |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Antoine J. Tissot (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the Individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [____] is the <u>Successor Trustee</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Oregon</u>)

(Slgnature)

County of Wasco)

OFFICIAL STAMP HEATHER THOMSON

IEI NOTARY PUBLIC-OREGON COMMISSION NO, 952745 MY COMMISSION EXPIRES JULY 26, 2020

Signed and sworn to (or affirmed) before me this <u>25th</u> day of <u>January</u>, <u>2017</u>

Antoine J. Tissot

Notary Public for <u>Oregon</u> My commission expires: <u>July 26, 2020</u>

Jay Faulconer 460 SW Madlson Ste 18 Corvallis OR 97333



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Jerry Kelly | |
|---------------------|-------------|--|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jerry Kelly (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature

County of <u>IS[and</u>) Signed and sworn to (or affirmed) before me this <u>84</u> day of <u>February</u>, <u>2017</u> by <u>Jerry Kelly</u><u>Bachara Cargent</u>

Notary Public State of Washington BARBARA SARGENT My Appointment Expires Dec 5, 2017

) SS.

State of Washington)

Notary Public for Washington My commission expires: 12-05-2017



OREGON FORECLOSURE AVOIDANCE PROGRAMUSTICE BENEFICIARY EXEMPTION AFFIDAVITGAL

| Lender/Beneficiary: | John Helmick |
|---------------------|--------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, John Helmick (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Oregon

County of <u>Lane</u>)

Signed and sworn to (or affirmed) before me this <u>16th</u> day of <u>July</u>, <u>2017</u> by John Helmick

Notary Public for Oregon My commission expires: March 14,2020



) SS.

Law Office of Paul Heatherman PC PO Box 8 Bend, OR 97709

Deschutes County Official Records Nancy Blankenship, County Clerk



2017-12999

DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM

| Lender/Beneficiary: | Joseph L Achen and Cynthia C Achen | |
|-------------------------|------------------------------------|--|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Joseph L Achen and Cynthia C Achen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];

exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

ignature)

County of <u>Deschutes</u>)

Ignature) State of <u>Oregon</u>)

) ss.

Signed and sworn to (or affirmed) before me this 3 day of April

(Signature) Cuppet of

OFFICIAL STAMP LINDA JEAN KERR NOTARY PUBLIC-OREGON COMMISSION NO. 930292 MY COMMISSION EXPIRES JULY 09, 2018

by Joseph L. Achen and Cynthia C. Achen

Notary Public for <u>Oregon</u> My commission expires; <u>7/9/18</u>

Tankersley, Wright & Strunk LLC 701 NE Evans Street McMinnville, OR 97128



DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Lender/Beneficiary: | Kathy Aaron |
|---|---------------------|-------------|
| ſ | Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Kathy Aaron (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

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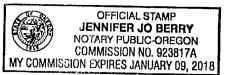
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ignature

) ss. County of <u>Yamhill</u>) Signed and sworn to (or affirmed) before me this <u>b</u> day of <u>Ma</u>, <u>2017</u> by <u>Kathy Aaron</u> Notary Public for <u>Oregu</u> My commission expires: <u>1918</u>



State of Oregon

The Law Offices of Erik: Graeff, P.C. 2125 N Flint AVE Portland, OR 97227

DECEIVE DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficia | y: Kelth R. Masterson |
|------------------|-----------------------|
| Jurisdiction* | |

*It Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lenger/Beneficiary is organized.

I, Erik Graeff (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon Under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

State of (<u>IFEGON</u>) Multiple () ss.

County of MINTDOMAN Signed and sworm to (or affirmed) before menthis _____ day of ______APF11_____. 201 by ______K Grae FF _______MON_L WELLIGEN ______

OFFICIAL STAMP MARY MORGAN SETTLE NOTARY PUBLIC - DREGON COMMISSION NO. 933170 MY COMMISSION EXPIRES NOVEMBER 02, 2018

| 1 3 ¹ | and the second sec |
|--|--|
| Mary Mit Ligen Il Notary Public for Orden | J-+- |
| Notary Public for Dreawin | |
| My commission expires: 41124 | 2018 |
| | |

Form \$00-\7/6/15



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | KeyBank, N.A. |
|---------------------|---------------|
| Jurisdiction* | Ohio |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: | Wilhelmina Huff

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: 41 ______ (not to exceed 175),
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Foreclosure Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Ohio) ss. County of Cuyahoga) Signed and sworn to (or affirmed) before me this 2day of by withelmine ture. Jahor Notary Public for My commission expires: 2017 **JOHNNY RISHA** Notary Public State of Ohio My Commission Expires MAHCH 15, 2017

;



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Klamath Public Employees Federal Credit Union |
|---------------------|---|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Alesia Claybaugh ______ (printed name) being first duly sworn, depose, and state that:

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Executive Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on Its behalf.

ise /1 (Signature)

| State of <u>Oregon</u>) | |
|--|---|
|) ss. | |
| County of <u>Klamath</u>) | |
| Signed and sworn to (or affirmed) before me th | nis <u>11th </u> day of <u>January </u> |
| by Alesia Claybaugh | |
| | Shannen M. Jørgiensen Shanner Jufer |
| and the second | Notary Public for Klamarth Public EmployeesFcy |
| r | My commission expires: July21,2019 |
| OFFICIAL SEAL | |
| NOTARY PUBLIC-OREGON | |
| COMMISSION NO. 940746 | |
| MY COMMISSION EXPIRES JULY 21, 2019 | |

Michael P. Rudd 411 Pine Street Klamath Fails, OR 97601



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | KLRHC (Klamath Lake Regional Housing Center) |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Betty Riley (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>zero</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the <u>Executive Director</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of Oregon) SS. County of Klamath _) Signed and sworn to (or affirmed) before me this 24 day of JANUARY 2017 by Betty Riley Notary Rublic for Oregon 9.70.201 OFFICIAL SEAL My commission expires: KAREN A BAKER NOTARY PUBLIC-OREGON COMMISSION NO, 480956 MY COMMISSION EXPIRES SEPTEMBER 20, 2017



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Kondaur Capital Corporation |
|---------------------|-----------------------------|
| | Delaware |
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Erick Williams being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: sixteen (16);
- 2. The undersigned further certifies that she/he:[check only one of the following boxes] [___]is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [_X_]is the Director of Loan Servicing of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | Cuch Suttan |
|-------------------------------------|---------------------------------------|
| | (Signature) |
| State of) | |
|)ss. | |
| County of) | 4 |
| Signed and sworn to (or affirmed by | d) before me thisday <u>whed</u> ,,,, |
| | Notary Public for |
| | My commission expires: |

| 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. |
|--|
| State of California County of <u>Orange</u> |
| Subscribed and sworn to (or affirmed) before me on this $\frac{12}{4}$ day of \underline{JULY} , 20 17, by $\underline{IULIAMS}$ proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. |
| R. SMITH-BROWNE Commission # 2094512 Notary Public - California Orange County My Comm. Expires Dec 22, 2018 (Seal) Signature |

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έι.

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Julio Aldecocea Senior Vice President Lakeview Loan Servicing, LLC 4425 Ponce de Leon Blvd, MS 5-251 Coral Gables, FL 33146

DECEIVED JAN 30 2017

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Lakeview Loan Servicing, LLC |
|---------------------|------------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Julio Aldecocea (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>58</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

) ss. County of Miami <u>Dade</u>)

State of Florida

 Signed and sworn to (or affirmed) before me this 20th _____ day of ______ day of _______, 2017

 by Julio Aldecocea as Senior Vice President of Lakeview Loan Servicing, LLC ______.



Notary/Public for the STATE My commission expires: _____

Land Home Financial Services, Inc. 3611 Sout Harbor Blvd. Sulte 100 Santa Ana CA 92704



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Land Home Financial Services Inc. |
|---------------|-----------------------------------|
| Jurisdiction* | CALIFORNIA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Teji Singh

(printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2 (TVVO)</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or

[] is the <u>Chief Servicing Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of California

) ss. County of <u>()YANAL</u>)

Signed and sworn to (or affirmed) before me this <u>S</u> day of <u>JANUAWA</u>

Notary Public for SMy commission expires: ONTADO

Form 300 V7/5/13

207

Patrick L. Stevens P.O. Box 10886 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | LinnCo Federai Credit Union |
|---------------------|-----------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| , Muffle McQuistion | (printed name) being firs | t dulv sworn, depose | , and state that |
|---------------------|---------------------------|----------------------|------------------|
|---------------------|---------------------------|----------------------|------------------|

This affidavit Is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u> [not to exceed 175];

The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Collections Supervisor</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Oregon) ss. County of Signed and sworn to (or affirmed) before me this 17 day of bγ Notary Public for 60 \sim My commission expires: 21 2020 OFFICIAL STAMP TALIA MARCIA LEE DAVIS NOTARY PUBLIC-OREGON COMMISSION NO. 952716 MY COMMISSION EXPIRES JULY 21, 2020

Form 300 V7/5/13



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM **BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | LNV CORPORATION | |
|---------------------|----------------------|--|
| Jurisdiction* | A NEVADA CORPORATION | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

, GRANT A. HAMILTON ___ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

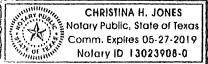
- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the <u>AUTHORIZED LOAN SERVICER</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavlt on its behalf.

(Signature)

State of TEXAS) ss.

County of COLLIN

| Signed and sworn to (or affirmed) before me | this <u>06</u> day of <u>JANUARY</u> 2017 | |
|---|---|--|
| by Grant A. Hamilton, Vice President, Comp | llance & Operations, MGC Mortgage, Inc. | |
| | Christing 74 yours | |
| | Notary Public for Collin County | |



| _ Christing 71 9 ones |
|--|
| Notary Public for <u>Collin County</u> |
| My commission expires: 05 - 27 - 2019 |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Ioan Depot. com LLC d/b/a imoAgage |
|---------------------|------------------------------------|
| Jurisdiction* | Delaware_ |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Leigh Hon Comle Rubby (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice</u> <u>for o stables</u>
 [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

iature)

State of ______

County of <u>COLLIN</u>) Signed and sworn to (or affirmed) before me this <u>13</u>th day of <u>MARCH</u>, <u>7011</u> by <u>LAIGN ANN CHMICKUSKI</u>

| | 140 |
|--|-----|
| JENNIFER RIEDEL Notary Public, State of Texas My Commission Explies December 02, 2017 | M |

) SS.

| Notary Public for 5-64 | 1.01 - | Fexas | |
|------------------------|--------|-------|--|
| My commission expires: | | | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Ioan Depot. com us d/b/a imongage |
|---------------------|-----------------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Leigh Hon Comic Rubby (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice</u> <u>Frositive</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

oriature)

State of $\underline{\text{Tex}(\zeta)}$ ss.

County of (0110)Signed and sworn to (or affirmed) before me this 13^{+} day of MARCh, 2011 by Ligh Ann Chmirlewski



| Notary Public I | for Stute | 201 | T | e X65 | |
|-----------------|------------|-----|----|-------|----------|
| My commissio | n explres: | 121 | 62 | 205 | \ |





DEPARTMENT OF JUSTICE PORTLAND LEGAL

ORGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Lender/Beneficiary: | loanDepot.com, LLC |
|---|----------------------------------|--|
| | Jurisdiction* | Delaware |
| J | Lateration and the second second | where the state is a state to the state to the state of t |

If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

Leigh Ann Chmielewski

December 02, 2017

__ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>10</u> [not to exceed 175];

| [] is the individual claiming exemption [>] is the Vice Presi | ne/he: [check only one of the following boxes] on from requirements established under Or Laws 2013, ch 304, or dent [insert title] of the entity claiming ed under Or Laws 2013) ch 304, and is authorized by such entity |
|--|---|
| State of $\underline{-1, \times 15}$ | (Signature) |
| County of (0) ss. | 12th, April 2017 |
| Signed and sworn to (or affirmed) before me this by <u>LIM MN CNMICLU</u> | wski |
| I | Notary Public for Jennifer Riedet |
| JENNIFER RIEDEL Notary Public, State of Texos My Commission Expires | My commission expires: 12 02 2017 |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | LPP MORTGAGE LTD |
|---------------------|-----------------------------|
| Jurisdiction* | A TEXAS LIMITED PARTNERSHIP |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, GRANT A. HAMILTON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 1 [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>AUTHORIZED LOAN SERVICER</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

(Signature)

State of <u>TEXAS</u>)

County of <u>COLLIN</u>)

lotary Public, State of Texas Comm. Expires 05-27-2019 Notary ID 13023908-0

| Signed and sworn to (or affirmed) before me th | is <u>06</u> day of <u>JANUARY</u> | 2017 |
|--|------------------------------------|------|
| by Grant A. Hamilton, Vice President, Complia | | |
| | _ Christian 74 yones | |
| | Notary Public for Collin County | |
| | My commission expires: 05-27-20 | 19 |

RECEIVED

After recording, return to:

M&T Bank Attention: Lindsey Noeson 475 Crosspoint Parkway Getzville, NY 14068

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | M&T Bank |
|---------------------|----------|
| Jurisdiction* | New Yark |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Christopher Zeis (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named Individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>7</u>_______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Administrative Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>New York</u>)) ss.

County of <u>Erie</u>) Signed and sworn to (or affirmed) before me this <u>10^H</u> day of <u>QQNUQ(Y</u>, <u>2017</u> by <u>Christopher Zeis, Administrative Vice President</u> <u>USALLY AL- MIDENE</u> Notary Public for <u>State of New York, Eric</u> Counter My commission expires: <u>12112</u>2019

> ASHLEY M. MISENER NQTARY PUBLIC STATE OF NEW YORK ERIE LIC. #01MI6252652 COMM. EXP 12/12/2019

> > Form 300 V7/5/13

Maps Credit Union Attn General Counsel PO Box 12398 Salem, OR 97309



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Marion and Polk Schools Credit Union dba Maps Credit Unlon |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Alan Hanson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Zero (0)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>General Counsel</u>
 [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

(Signature)



| CARLA M Everenale |
|--------------------------------------|
| Notary Public for Oregon |
| My commission expires: July 22, 2019 |

Jeffrey L. Pugh Attorney at Law P.O. Box 1231 Roseburg, OR 97470



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Mary A. Becherer |
|---------------------|------------------|
| Jurisdiction* | Oregon resident |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| 1 | Marv | A. Bec | herer | | |
|----|------|--------|-------|--|--|
| 1. | | | | | |

(printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>One</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [1] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mary Ch. Becheren Signature)

State of Oregon) ss.

County of Douglas

Signed and sworn to (or affirmed) before me this 26th day of <u>January</u>, 2017 by Mary A. Becherer



| Notary Public for | Ôr | rego | | 1 (g. 1 | | | |
|-------------------|--------|------|----|---------|----|----|--|
| My commission ex | pires: | 02 | 18 | 12 | 20 | 18 | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Matrix Financial Services Corporation |
|---------------------|---------------------------------------|
| Jurisdiction* | Arizona |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

l, Jesse Steinberg (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>13</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[√] is the Assistant Vice President [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Sighature)

My commission expires: January 31, 2018

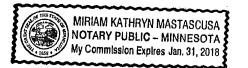
State of <u>Minnesota</u>) ss.

County of <u>Hennepin</u>)

| Signed and sworn to (or affirmed) before me this 27 | day of January | , 2017 |
|--|--------------------------|---------|
| by Jesse Steinberg, Assistant Vice President, Matrix Fir | nancial Services Corpora | ation . |

MUMA

Notary Public for Minnesota



MB Financial Bank, N.A. 2251 Rombach Ave Wilmington, OH 45177 attn: Rita Marrara

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CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | MB Financial Bank, N.A. |
|---------------------|-------------------------|
| Jurisdiction* | Illinois |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Rita Marrara (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>3</u>______[not to exceed 175];

The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice President</u>, <u>Default Administration</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mana

Umbre

10/10/2019

(Signature)

State of <u>01+ID</u>)) ss. County of <u>Uniton</u>) Signed and sworn to (or affirmed) before me this <u>30th</u> day of <u>Jannary</u>, <u>2017</u> by <u>Utc. Marcura</u>

Notary Public for

My commission expires: ____

AMBER WHITE NOTARY PUBLIC, STATE OF OHIO FAYETTE COUNTY MY COMMISSION EXPIRES OCT. 10, 2019



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | MGC MORTGAGE, INC. |
|---------------------|---------------------|
| Jurisdiction* | A TEXAS CORPORATION |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, GRANT A. HAMILTON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u>_______[not to exceed 175];

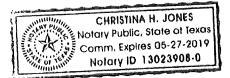
to execute this affidavit on its behalf.

(Signature)

State of <u>TEXAS</u>)))'ss.

County of <u>COLLIN</u>)

| Signed and sworn to (or affirmed) before me this <u>06</u> day of <u>JANUARY</u> | , 2017 |
|---|--------|
| by Grant A. Hamilton, Vice President, Compliance & Operations, MGC Mortgage, Inc. | |
| Clinist's Hames | |



| Christina Hyones | |
|-----------------------------------|--|
| Notary Public for Collin County | |
| My commission expires: 05-27-2019 | |

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Mid America Mortgage, Inc. | |
|---------------------|----------------------------|--|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, MIKE KENNEMEX (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| State of T-CXAS) | |
|--|--|
|) ss. | |
| County of DALLAS | ICHA ILALI ODO |
| Signed and sworn to (or affirmed) before met by | this <u>Viv</u> day of <u>May</u> , <u>WII</u> |
| by lestile & Martinez | |
| | Mole Mar |
| | Notary Public for State of Texas |
| LESLIE E. MARTINEZ | My commission expires: 11.70-19 |
| Notary Public, State of Texas | |
| Comm. Expires 11-20-2019 | |
| Notary ID 130447417 | |

Mid Oregon FCU Attn: Dena Driskill, Collections PO Box 6749 Bend OR 97708-6749



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DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | MId Oregon Federal Credit Union |
|---------------------|---------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary Is organized.

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Vice President of Lending</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

My commission expires:

Signature

State of <u>Oregon</u>)) ss.

County of <u>Deschutes</u>) Signed and sworn to (or affirmed) before me this <u>4th</u> day of <u>January</u> by <u>Cynthia Krickhahn</u>

Notary Public for Oregon

9-23-17

OFFICIAL STAMP DAWN G MORRISON **BLIC- OREGON** 920249 COMMISSION NO. BY COMMISSION EXPIRES SEPTEMBER 23, 2017

2017

MidFirst Bank 999 NW Grand Blvd. Oklahoma City, OK 73118 Attn: Ken Kappers - Foreclosure



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | MidFirst Bank |
|---------------------|---------------|
| Jurisdiction* | Oklahoma |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

_ (printed name) being first duly sworn, depose, and state that: I, Thad Burr

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 23 *Inot to exceed 175*
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] __] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ [insert title] of the entity claiming [🖌] is the First Vice President exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) Thad Burr, First Vice President

State of Oklahoma

) ss. County of Oklahoma

th Signed and sworn to (or affirmed) before me this <u>//7</u> day of anuar by _____

Notary Public for My commission expires:



Stayton Law P O Box 248 Stayton OR 97383

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Millicent Seales | |
|---------------------|------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Ł | Millicent | Seales | (nrinted name) he | بالبالم فمعلك بمطل | ملم مسميدهم | | A total a the st | ŧ. |
|----|---------------------------------------|-------------|-------------------|--------------------|-------------|------------|------------------|----|
| ١, | · · · · · · · · · · · · · · · · · · · | · · · · · · | (printed name) be | ning nirst dun | y sworn, de | epose, and | state that | Ľ. |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [XX] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [...] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

hauf M. Sache

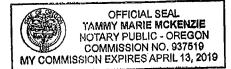
Oregon

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Lane</u>) Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>January</u>, <u>2017</u> by <u>Millicent Seales</u>

Notary Public for-

My commission expires: ____



Stephen L. Tabor, P.C. PO Box 350 Subilmity, OR 97385

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Morris W. Barker | |
|---------------------|------------------|--|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary Is organized.

Morris W. Barker _ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>zero _____ [not to exceed 175];</u>
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Manis W. Boulsen

(Signature

State of Washington)

NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES NOVEMBER 29, 2020

| County of Thurston | |
|--|----------------------------------|
| Signed and sworn to (or affirmed) before r | ne this 31 day of January , 2017 |
| by Morris W. Barker | |
| | luateina. |
| | Notary Public for URAMACTOR) |
| LYNDA D WATKINS | My commission expires: |

Rena Tratchei Veterans United Home Loans Attn: Servicing 1400 Veterans United Dr. Columbia, MO 65203

MAR 02 2017

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Mortgage Research Center, LLC d/b/a Veterans United Home Loans |
|---------------------|---|
| Jurisdiction* | Missouri |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, John Meyer _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named Individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Director of Servicing</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Missouri) ss. County of Boone Signed and sworn to (or affirmed) before me this 2nd day of Mare いテ by . Mesoun Notary Public for 04 09 My commission expires: 2020 E JW SCHULTE Notary Public - Notary Seal State of Missouri, Boone County Commission Number 12390740 My Commission Expires Sep 4, 2020

Form 300 V7/5/13



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | MUFG Union Bank, N.A. |
|---------------------|-----------------------|
| Jurisdiction* | United States |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Robert Haas (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 001 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [____] is the <u>Managing Director</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of _____)) ss. County of _____) Signed and sworn to (or affirmed) before me this _____ day of _____, ____, by _____ Notary Public for _____ SEE ATTACHED My commission expires: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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.

| State of California | |) |
|---------------------|------------|---|
| County of San Died | 10 |) |
| On_1/11/17 | before me, | Souvanny Sipangna, a notary public Here Insert Name and Title of the Officer |
| Date | | Here Insert Name and Title of the Officer |
| personally appeared | | |
| | | Name(s) of Signer(s) |

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 (ns/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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Public

Place Notary Seal Above

actinition of Attached Decument

SOUVANNY SIPANGNA Commission # 2139039 Notary Public - California

San Diego County y Comm. Expires Jan 2, 2020

OPTIONAL '

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

| Description of A | | | | |
|---------------------------------|---|-------------------------------|-------------------------|--|
| Title or Type of | Title or Type of Document: <u>Beneficia of Exemption</u> Document Date: <u>No Dute</u> Number of Pages: <u>I</u> Signer(s) Other Than Named Above: <u>No other Signers</u> | | | |
| Number of Page | es: Signer(s) Other Than | Named Above: _ | No other Signers | |
| Capacity(ies) C | aimed by Signer(s) | | ð | |
| Signer's Name: | Robert Haas | Signer's Name: | | |
| Corporate Off | cer — Title(s): | Corporate Officer — Title(s): | | |
| □ Partner – □ Limited □ General | | 🗆 Partner — 🗌 | 🛛 Limited 🛛 General | |
| ⊠Individual | Attorney in Fact | 🗆 Individual | Attorney in Fact | |
| 🗆 Trustee | Guardian or Conservator | 🗆 Trustee | Guardian or Conservator | |
| Other: | | Other: | | |
| Signer Is Representing: | | Signer Is Repre | esenting: | |
| 5 I | 5 | • | - | |

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DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NANCY | 丁. | WOLF | |
|---------------------|-------|----|------|--|
| Jurisdiction* | | | | |

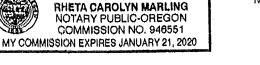
*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Lawrence, W. ERWIN (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Attorney For Beneficially</u>, <u>Nancy T, Wolf</u>[insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>OREGON</u>)) ss. County of <u>DESCHUTES</u>) Signed and sworn to (or affirmed) before me this <u>12</u>th day of <u>June</u>, <u>2017</u> by <u>Lawrence</u> <u>W. ERWIN</u>, <u>.</u> Notary Public for <u>Oregon</u>, <u>.</u> My commission expires: <u>1-21-20</u>



JAN 1.7 201:

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | National Mortgage Co. |
|---------------------|-----------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provIde the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Maureen Huntley (printed name) being first duly sworn, depose, and state that:

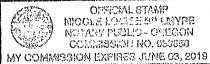
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the President
 [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

alle Signature

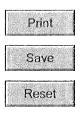
State of <u>Oregon</u>)

County of <u>Washington</u>) Signed and sworn to (or affirmed) before me this <u>16th</u> day of <u>January</u>, <u>2017</u> by <u>Maureen Huntley, President of National Mortgage Co.</u> <u>Mucole</u> <u>January</u>.



| rtgage Co. 👩 | 1 n AF. | |
|-------------------|----------------|--|
| Theole | 7- Billing | |
| Notary Public for | Oregont | |
| My commission e | xpires: 6-3-19 | |
| | | |





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NATIONWIDE ADVANTAGE MOLIGAGE CO. |
|---------------------|-----------------------------------|
| Jurisdiction* | LISA A. NICHOLSON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

LISA A. NICHULSON _____ (printed name) being first duly sworn, depose, and state that: ١.

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____ [not to exceed 175];

2. The undersigned further certifies that she/he: *[check only one of the following boxes]*

| [] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, | or |
|---|----|
| [X] is the VICE PREGIDENT. [insert title] of the entity claiming | |
| exemption from requirements established under Or Laws/2013, ch 304, and is authorized by such entit | ty |
| to execute this affidavit on its behalf. | • |

(Slanature)

State of $\int \omega \omega A$) County of Pack)) ss.

Signed and sworn to (or affirmed) before me this 25 day of <u>MARCOM</u>, 2017 Lunda Huerr by LISA A NICHOISON

Notary Public for

My commission expires:

| 1 8 | LINDA HUESER |
|----------|--------------------------|
| 11 60 61 | - GOMMASSION NO. 1966883 |
| 11 返回 1 | MT COMMISSION EXPIRES |
| Tuyis | 5128/19 1 |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Navy Federal Credit Union |
|---------------------|---------------------------|
| Jurisdiction* | Vienna, Virginia |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Michael Headen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] Is the <u>Manager. Mortgage Liquidations</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and Is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Virginia

 County of <u>Fairfax</u>)

 Signed and sworn to (or affirmed) before me this <u>9</u> day of <u>January</u>, <u>2017</u>

 by <u>Michael Headen</u>

BYDIM. Illinon

Notary Public for Virginia My commission expires: 10/31/2018



) ss.

Form 300 V7/5/13

RICHARD W. TODD TODD AND SHANNON 226 W. HIST COLUMBIA RIVER HWY TROUTDALE, OREGON 97060

RECEIVE MAR 2 8 2017

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Nev Scott | |
|---------------------|-----------|--|
| Jurisdiction* | Oregon | |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Nev Scott

_____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None</u>;

The undersigned further certifies that she/he:

to execute this affidavit on its behalf.

(Signature)

County of Multrumby

State of 1

Signed and sworn to (or affirmed) before me this 15th day of <u>March</u>, <u>2017</u> by Nev Scott

Notary Public for CONCORD 7.020 My commission expires:





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NMC Funding Group, LLC |
|---------------------|------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: | Maureen Huntley

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The understand further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [1 is the President of NMC Acquisition, Inc., Manager [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature)

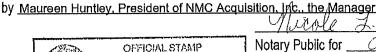
B. Wind D.

State of Oregon) ss.

County of Washington)

Signed and sworn to (or affirmed) before me this 16th ____ day of _____

Mirale





| Notary Public for alog on | |
|--------------------------------|---|
| My commission expires: 06-3-19 | |
| | • |

Form 300 V7/5/13

Donald J. Churnside PO Box 1499 Eugene, OR 97440

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Northwest Community Credit Union |
|---------------------|----------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>PAUNA FECUNE</u>, MULL (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____()____(not to exceed 175);
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>manual share sha</u>

Signature) Doct wood Construction (Signature) Doct wood Construction (1)

State of <u>Oregon</u>)) ss. County of <u>Lane</u>) Signed and sworn to (or affirmed) before me this <u>3^{vd}</u> day of <u>April</u>, <u>2017</u> by <u>laula</u> <u>Franz</u> <u>Unubur</u> <u>M</u> <u>Wallocc</u>. Notary Public for <u>Oregon</u> My commission expires. <u>April</u> <u>11th</u>, <u>2020</u>

OFFICIAL STAMP KIMBERLY M WALLACE NOTARY PUBLIC-OREGON COMMISSION NO. 949664 MY COMMISSION EXPIRES APRIL 17, 2020

ł

John D. Albert Sherman Sherman Johnnie & Hoyt, LLP PO Box 2247 Salem, OR 97308

DEPARTMENT OF JUSTICE PORTLAND LEGAL OREGON FORECLOSURE AVOIDANCE PROGRAM

BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Northwest Farm Credit Services, FLCA |
|---------------------|--------------------------------------|
| Jurisdiction* | United States |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

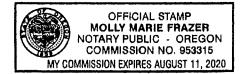
I, Pete Swan (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: 0______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>AVP Customer Solutions</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavlt on Its behalf.
 []

State of <u>Oregon</u>)) ss. County of <u>Marion</u>) Signed and sworn to (or affirmed) before me this <u>2Le</u> day of <u>January</u>, <u>2017</u> by <u>Pete Swan</u>

| A | · · | |
|----------------------|--------------|---|
| Mollis | will Sm. | |
| Notary Public for | Dregove | |
| My commission expire | s: 8-11-2020 |) |



John D. Albert Sherman Sherman Johnnie & Hoyt, LLP PO Box 2247 Salem, OR 97308

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Northwest Farm Credit Services, PCA |
|---------------------|-------------------------------------|
| Jurisdiction* | United States |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Pete Swan (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] Is the <u>AVP-Customer Solutions</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

 State of <u>Oregon</u>)
) ss.

 County of <u>Marion</u>)
)

 Signed and sworn to (or affirmed) before me this <u>210</u> day of <u>January</u>, <u>2017</u>

 by <u>Pete Swan</u>
 <u>Mully</u> <u>Marue</u>

 Notary Public for <u>Oregon</u>

 My commission expires;



CIVIL ENFORCEMENT DIVISION

After recording, return to:

Note Tracker Corporation c/o MDS, LLC P.O. Box 18265 Spokane, WA 99228

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Note Tracker Corporation |
|---------------------|--------------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>ISrael</u> <u>Flechter</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>California</u>)) ss.

County of San Diego)

Signed and sworn to (or affirmed) before me this 13^{th} day of <u>January</u>, <u>2017</u> by $\pm srael$ Hechter

Notary Public for Cali Fornia

My commission expires: 3-12-2020



NPL CAPITAL, LLC 228 PARK AVENUE S, #28282 NEW YORK, NY 10003



DEPARTMENT OF JUSTICE PORTLAND LEGAL **OREGON FORECLOSURE AVOIDANCE PROGRAM** BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NPL CAPITAL, LLC |
|---------------------|------------------|
| Jurisdiction* | Peleware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

Lindsay Gordon (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _[insert title] of the entity claiming manager [🗸] is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

UNP

State of Prento Kico

04/20/2017 \$5.00

(Signature)

Notary Public for ____

My commission expires:

Affidavit - 4922 -

County of Signed and sworn to (or affirmed) before me this _28th day of indsay Gordon by

O

LEBRO

NOTE



Form 300 V7/5/13

AFTER RECORDING, RETURN TO: Michelle M. Bertolino [EC] Farleigh Wada Witt 121 SW Morrison Street, Suite 600 Portland, OR 97204

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NW Preferred Federal Credit Union |
|---------------------|-----------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized,

VIKOR DON19 $1.\Gamma$

(printed name), being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: \checkmark [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] []] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304.ør

[insert title] of the entity claiming [121] is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. Ignature) State of L SS. JI County of V day of April, 2017, by This instrument was acknowledged before me on this of NW Preferred as

Federal Credit Union.



Notary Public/for Oregon My commission expires:

NW PRIORITY CREDIT UNION P.O. BOX 16640 PORTLAND, OREGON, 97292-0640



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | NW Priority Credit Union | |
|---------------------|--------------------------|--|
| Jurisdiction* | Oregon State | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Mark Turnham (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>175</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>CEO and President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for C

My commission expires

(Signature)

January

State of <u>Oregon</u>)) ss.

County of $M_a/(f_n ema)$ Signed and sworn to (or affirmed) before me this 12^{-} day of _____ by $Mar \mathcal{K}$ turn ham

OFFICIAL STAMP NANCY FAYE CHANDLER **NOTARY PUBLIC-OREGON** COMMISSION NO. 942621 MY COMMISSION EXPIRES SEPTEMBER 21, 2019

DECEIVED JAN 23 2017

CIVIL ENFORCEMENT DIVISION

After recording, return to:

Note Tracker Corporation c/o MDS, LLC P.O. Box 18265 Spokane, WA 99228

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Ocean 18, LLC |
|---------------------|---------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Terry Darky (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u>______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Authorized Signer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>California</u>)) ss.

County of <u>San Diego</u>)

Signed and sworn to (or affirmed) before me this <u>13th</u> day of <u>January</u>, <u>2017</u> by <u>Terry Dailey</u>

Notary Public for California



My commission expires: 3-12-2020

OnPoint Community Credit Union P.O. Box 3750 Portland, OR 97208 Attn: Joe Vedus



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | OnPoint Community Credit Union |
|---------------------|--------------------------------|
| Jurisdiction* | Oregon |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Veronica M. Ervin (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>25</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Senior Vice President/Chief Compliance Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Jeromicet .

State of <u>Oregon</u>)

County of <u>Multhomah</u>)

Signed and sworn to (or affirmed) before me this <u>13th</u> day of <u>January</u>, <u>2017</u> by <u>Veronica M. Ervin</u>

Lithm

Notary Public for Oregon My commission expires:

OFFICIAL SEAL KATHLEEN M BRANNAN **NOTARY PUBLIC - OREGON** COMMISSION NO. 480609 MY COMMISSION EXPICES AUGUST 12, 2017

MY COMMISSION EXPIRES JANUARY 13, 2020

OR Resolutions LLC Attn: Michelle Pack PO Box 2747 Salem, OR 97301

DEPARTMENT OF JUSTICE OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| · | Lender/Ben'eficiary: | OR Resolutions LLC |
|---|----------------------|--------------------|
| | Jurisdiction* | Oregon |

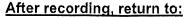
*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Cralg Hummel (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ________ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the EVP. Chief Credit Officer [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of) ss. County of Signed and sworn to (or affirmed) before me this Notary Public for Unde My commission expires: OFFICIAL STAMP SUNNY M TUCKER NOTARY PUBLIC - OREGON COMMISSION NO. 946073



Oregon Community Credit Union Enterprise Risk & Administration P.O. Box 77002 Springfieid OR 97475-0146

COMMISSION NO. 952728

MY COMMISSION EXPIRES JULY 25, 2020



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Oregon Community Credit Union |
|---------------------|-------------------------------|
| Jurisdiction* | Oregon |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Gregory Schumacher (r | printed name) | being first du | ily sworn, d | epose, | and state that: |
|-----------------------|---------------|----------------|--------------|--------|-----------------|
|-----------------------|---------------|----------------|--------------|--------|-----------------|

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>Two (2)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [
 [
] is the <u>VP Compliance Counsel Risk & Administration</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>OVECIDN</u>)) ss. County of L (and Signed and sworn to (or affirmed) before me this 'day of mach by Notary Public for My commission expires: **OFFICIAL STAMP** MOLLY ADELE HENRY NOTARY PUBLIC - OREGON

<u>After recording return to:</u> Hershner Hunter LLP P.O. Box 1475 Eugene, OR 97440



DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | OREGON PACIFIC BANKING COMPANY |
|---------------------|--------------------------------|
| Jurisdiction* | OREGON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, BROOK BURKHART (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, $\S2(1)(b)$.

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2 [not to exceed</u> <u>175].</u>
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming the exemption form requirements established under Or
 Laws 2013, ch 304, or

[X] is the Vice President of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Oregon

)) ss.

County of Lane

Signed and sworn to (or affirmed) before me this <u>5th</u> day of <u>January</u>, 2017 by Brook Burkhart.

Notary Public for Oregor

My commission Explres: July 9 2017



Form 300 V7/5/13

00790087.DOCX

Oregon Pioneer FCU 17884 SE McLoughlin Blvd. Milwaukie, OR 97267



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Oregon Pioneer Federal Credit Union |
|---------------------|-------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Mark Davis _ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a clalm of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [/] is the Chief Executive Officer __ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Mark Dam's (Signature)

State of Oregon

) ss. County of <u>Clackamas</u>)

Signed and sworn to (or affirmed) before me this <u>19th</u> day of <u>January</u> 2017 by <u>Mark Dav</u>is

monuber Notary Public for Oregon Pioneer Federal Credit Union My commission expires: (lucust 13



Patrick L. Stevens P.O. Box 10886 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Oregon State Credit Union |
|---------------------|---------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| l, Wendy Martin | (printed name) t | being first duly | sworn, depose, | and state that: |
|-----------------|------------------|------------------|----------------|-----------------|
|-----------------|------------------|------------------|----------------|-----------------|

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86,752 or by sult under ORS 88,010 during the calendar year preceding the date of this affidavit: <u>3</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Centeralized Services Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Wendy Mark C.S. Mgg (Signature) State of Oregon) SS. County of tatto Signed and sworn to (or afflimed) before me this 23 day of JAn bv – WANDU MARTIN Notary Public fd OFFICIAL STAMP My commission expires **KIMBERLY J. GATES** NOTARY PUBLIC-OREGON COMMISSION NO. 939777 MY COMMISSION EXPIRES JUNE 11, 2019

Oregonians Credit Union Attn: Julia Brown 6915 SE Lake Rd Milwaukie OR 97267

JAN 27 2017

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM **BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | Oregonians Credit Union |
|---------------------|-------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I, Tom Duda

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0_____[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [1] is the Loan Manager [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for Oregon

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Clackamas</u>) 2017 Signed and sworn to (or affirmed) before me this <u>25th</u> day of <u>January</u> by Tom Duda

Arlenter

My commission expires: May 14, 2018

OFFICIAL STAMP JULIA FRANCES BROWN NOTARY PUBLIC-OREGON COMMISSION NO. 928593 MY COMMISSION EXPIRES MAY 14, 2018



Patrick L. Stevens P.O. Box 10866 Eugene, OR 97440

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DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pacific Cascade Federal Credit Union |
|---------------------|--------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiery Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Lori Bryan _____ (printed neme) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named Individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>VP of Operations</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Oregon</u>) State of <u>Oregon</u>) ss. County of <u>PUPL</u>) Signed and swom to (or affirmed) before me this <u>A</u>M day of <u>CUMANY</u>, <u>2017</u> by <u>OY i U. BYYAN</u> <u>MULIMAN BOWMAN, GUGHT</u> Notary Public for <u>OYEG ON</u> My commission expires: <u>10-30-2017</u>

PACIFIC CONTINENTAL BANK ATTN: KATE SALYERS PO BOX 10727 EUGENE, OR 97440-2727



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pacific Continental Bank, an Oregon State Chartered Bank | |
|---------------------|--|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, ____ Damon Rose, EVP, Chief Credit Officer (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Executive Vice President. Chief Credit Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of) SS. County of Lane) Signed and sworn to (or affirmed) before me this $\frac{11^{+}h}{1}$ day of Δ Phuan by Damon R. Rose, Executive Vice Presiden OFFICIAL STAMP AARON CHASE NOTARY PUBLIC-OREGO Notary Public for ______ My commission expires: 10/26 COMMISSION NO. 955804 MY COMMISSION EXPIRES OCTOBER 28, 2020

George Hall Pacific Crest Federal Credit Union 2972 Washburn Way Klamath Falls, OR 97603

DECENVE JAN II 2017

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pacific Crest Federal Credit Union |
|---------------------|------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, George Hall (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] Is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Oregon)

6

) 88.

| County of Klamath | | |
|--|--|---------|
| Signed and sworn to (or affirmed) before me th | 11s 11_ day of January | _, 2017 |
| by George Hall | | · / |
| Je | Susann. Geren | mla, |
| ler, | Notary Public for Oregon | |
| OFFICIAL SEAL | My commission expires: 10/12, | 119 |
| NOTARY PUBLIC-OREGON | ······································ | |
| COMMISSION NO. 943462 () | | |
| MY COMMISSION EXPIRES OCTOBER 12, 2019 () | | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pacific NW Federal Credit Union | |
|---------------------|---------------------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized,

I, Karina Perez (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>_______[not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Risk & Compliance Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature State of) SS. County of MULHWWWW Signed and sworn to (or affirmed) before me this ______ day of ______ FIVP bv avina Yi NA U Notary Public for OVODUN 1999999 OFFICIAL STAMP ANA JULIA VARGAS My commission expires: _9128 NOTARY PUBLIC-OREGON COMMISSION NO. 932606 AY COMMISSION EXPIRES SEPTEMBER 28, 2018



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pacific West Bank, 2040 8th Avenue, West Linn, OR 97068 | |
|-------------------------|---|--|
| Jurisdiction* | Oregon | |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Benjamin J Mansheim, VP, Risk Management (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Vice President and Risk Management Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Oregon)) ss. County of Oregon) Signed and sworn to (or affirmed) before me this 12 day of January, 2017 by Benjamin Mansheim OFFICIAL STAMP JAYNE M. ARNOLDY NOTARY PUBLIC - OREGON My commission expires: May 5,2020

COMMISSION NO. 949961 MY COMMISSION EXPIRES MAY 5, 2020

Paramount Equity Mortgage Attn: Loan Servicing 8781 Sierra College Blvd Rosevilie, CA 95661



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Paramount Equity Mortgage, LLC |
|---------------------|--------------------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, John Jason Walker (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u>_______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Paramount Equity Mortgage, LLC</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signatute)

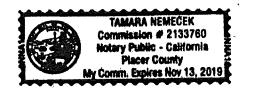
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

<u></u>

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.

| State of California Placev |) $(1 + 1) = 0$ |
|--------------------------------|---|
| On March 9, 2017 before me, | Tanara Venecele Hotary Public |
| Dete | Have been the send Title of the Officer |
| personally appeared Jehn Jasin | Ualler |
| · | Name(s) of Signer(s) |

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(les), 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 California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

Signature of Notary Public

Place Notary Seal Above

OPTIONAL ·

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

| Description of Attached Document | | | |
|---------------------------------------|-------------------------------------|--|--|
| Title or Type of Document: | Document Date: | | |
| Number of Pages: Signer(s) Other Than | n Named Above: | | |
| Capacity(les) Claimed by Signer(s) | | | |
| Signer's Name: | Signer's Name: | | |
| Corporate Officer – Titie(s): | Corporate Officer – Title(s): | | |
| Partner – Limited General | Partner — Limited General | | |
| Individual Attorney in Fact | 🗆 Individual 👘 🗀 Attorney in Fact | | |
| Trustee Guardian or Conservator | Trustee Guardian or Conservator | | |
| Other: | Other: | | |
| Signer is Representing: | Signer Is Representing: | | |
| | | | |

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Partners for Payment Relief DE IV, LLC 3748 WEST CHESTER PIKE, Suite 103 NEWTON SQUARE, PA 19073

DEPARTMENT OF JUSTICE DEPARTMENTEGALUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Partners for Payment Relief DE IV, LLC |
|---------------------|--|
| Jurisdiction* | Pennsylvania |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction In which the Lender/Beneficiary is organized.

I, John Sweeney (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u>______[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming [1 is the Vice President exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. (Signature) State of Kennsylvania)) ss. County of Deloware) Signed and sworn to (or affirmed) before me this _____ day of lanuar 2017 Sween bv Notary Public for Pennsulvania My commission expires: ຂັ້ນອີດ COMMONWEALTH OF PENNSYLVAMA NOTARIAL SEAL CHELSEA PROCOPIO, Notary Public Newtown Township, Delaware County My Commission Expires May 9, 2020

PARTNERS FOR PAYMENT RELIEF DE II, LLC 3748 WEST CHESTER PIKE, Suite 103 NEWTON SQUARE, PA 19073



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | PARTNERS FOR PAYMENT RELIEF DE II, LLC |
|---------------------|--|
| Jurisdiction* | Pennsylvania |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, John Sweeney ______ (printed name) being first duly sworn, depose, and state that:

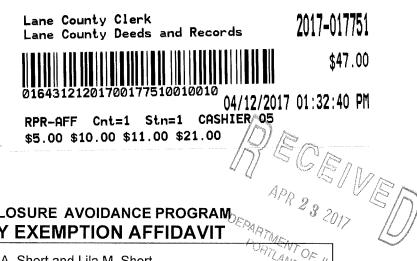
This affidavlt is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of Pennsylvania) SS. County of Delawarc Signed and sworn to (or affirmed) before me this 9 day of Januar 2017 by John Notary Public for fense Ivan My commission expires: COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL CHELSEA KIMPEL, Notary Public Newtown Twp., Delaware County My Commission Expires August 22, 2017

James A. Hendershott 132 E. Broadway, Suite 400 Eugene, OR 97401



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Patrick A. Short and Lila M. Short | ORTLANDLECASTICS |
|---------------------|------------------------------------|------------------|
| Jurisdiction* | Lane County, State of Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Patrick A. Short and I, Lila M. Short (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b). This is regarding the Trust Deed recorded as instrument number 2012-028949 06/13/2012, Grantors: Mark E. Shequin and Diane A. Shequin.

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 (zero) [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] $\sqrt{1}$ is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or 1 lis the *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of OREGON

County of LANE

) SS.

Signed and sworn to (or affirmed) before me this _6th day of MARCH 2017 by Patrick A. Short and Lila M. Short

udith

Notary Public for Oregor My commission expires:

7/10/2017



Robert A. Smeikal P.O. Box 1758 Eugene, OR 97440



1.

DESALETIONT OF JUST CE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Paula Rini |
|---------------------|------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| | • | | | | |
|----|------------|----------------|-------------------|--------------|----------------------|
| ١, | Paula Rini | (printed name) |) being first dul | y sworn, dep | ose, and state that: |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: If Inot to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] $\sqrt{1}$ is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the __ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

aula Rin

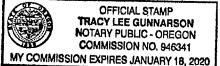
(Signature)

mil

State of L) ss. County of

.

| Signed and | sworn to (or affirmed) before m | ne this day of _ <u>March</u> | <u></u> , <u>2017</u> |
|-------------|---------------------------------|-------------------------------|-----------------------|
| by Paula Ri | | | · |
| • | | MALY GUMMANZIER | ノ |
| | | Notary Public for Oven | |
| | OFFICIAL STAMP | My commission expires:1_ | 18-2020 |





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | PennyMac Loan Services LLC** | |
|---------------------|------------------------------|--|
| Jurisdiction* | DE | |

*If Lender/Beneficlary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficlary is organized.

I, Manuel Mata (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 69 [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [/] is the <u>Foreclosure Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Manuel Mata Jr. (Signature)

State of ____California)

) ss. County of <u>Ventura</u>)

Signed and sworn to (or affirmed) before me this 31^{57} day of 2_____

by <u>Manuel Mata Jr</u> FRANK MICHAEL HOFF Commission # 2094816 Notary Public - Callfornia Ventura County My Comm. Expires Jan 21, 2019

| Notary Public for | Galiforna |
|------------------------|-----------|
| My commission expires: | 1/21/19 |

EXHIBIT A - PennyMac Loan Services, LLC Related Entities

| | | | | | F | | | | | | - | | ~ 1 | | | | | |
|---|------------|---|---|----------------------------|----------------|------------------------|-----------------------------|-------------------------------|-------------------------------|-------------------------------|--------------------------|--------------------------|-------------------------|--|----------------------------|----------------------------|----------------------------|----------------------------|
| Combined First Legal filings achieved in 2016 | 0 | | | | | 9 | S8 | | 0 | - | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 |
| Beneficiary Name | FNBN1, LLC | Wilmington Savings Fund Society, FSB DBA Christiana Trust as Trustee for HLSS Mortgage Master Trust for the benefit of | the Holders of the Series 2014-4 Certificates issued by the | HLSS Mortgage Master Irust | PennyMac Corp. | PennyMac Holdings, LLC | PennyMac Loan Services, LLC | PennyMac Loan Trust 2010-NPL1 | PennyMac Loan Trust 2011-NPL1 | PennyMac Loan Trust 2012-NPL1 | PMT NPL Financing 2014-1 | PMT NPL Financing 2015-1 | PNMAC Mortgage Co., LLC | PNMAC Mortgage Opportunity Fund Investors, LLC | SWDNSI Trust Series 2010-1 | SWDNSI Trust Series 2010-2 | SWDNSI Trust Series 2010-3 | SWDNSI Trust Series 2010-4 |

Farleigh Wada Witt 121 SW Morrison St, Sulte 600 Portland, OR 97204

State of Virginia



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pentagon Federal Credit Union |
|---------------------|-------------------------------|
| Jurisdiction* | Federal Credit Union |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I, John C. Dorn

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavlt: One (1) [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ [insert title] of the entity claiming [/] is the Vice President, Collections exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

) ss. Gounty of Alexandria) Signed and sworn to (or affirmed) before me this day of by Notary Public for My commission expires: SESSERED ENREPORED SCOUELINE SCOUELINE MISSION EXPIRES

John A. Boyd People's Bank of Commerce 1311 E. Barnett Road Medford, Oregon 97504





Jackson County Official Records 2017-000089

01/03/2017 12:32:52 PM

Total:\$63.00

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\$20.00 \$4.00

\$5.00 \$10.00 \$5.00 \$8.00 \$11.00

Christine Walker - County Clerk

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | People's Bank of Commerce |
|---------------------|---------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, John A. Boyd (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>one</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[___] is the <u>Cheif Credit Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Ure) SS. County of Signed and sworn to (or affirmed) before me this 3rd day of bv 、 Notary Public for OFFICIAL STAMP My commission expires: RACHAEL ANN SMITH NOTARY PUBLIC-OREGON COMMISSION NO. 947137 MY COMMISSION EXPIRES FEBRUARY 09, 2020

People's Community Federal Credit Union Attn: Foreclosure Department PO Box 764 Vancouver, WA 98666

DECEIVED

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | People's Community Federal Credit Union | |
|---------------------------|---|--|
| Jurisdiction * | Washington State | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Ed Seidenberg (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>one [not to exceed 175]</u>;
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>President/CEO</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

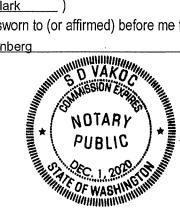
 State of <u>Washington</u>)

) ss.

 County of <u>Clark</u>)

 Signed and sworn to (or affirmed) before me this <u>10th</u> day of <u>January</u>, <u>2017</u>

 by <u>Ed Seidenberg</u>



Notary Public for Washington My commission expires: 12/01/2020



DEPARTMENT OF JUSTICE PORTLAND LEGAL **OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | PHH Mortgage Corporation |
|---------------------|--------------------------|
| Jurisdiction* | New York |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| | Melissa Nowicki | | | | | | | |
|----|---------------------|---------------|------|-------------|-----------|---------|-----------|-------|
| 1 | 14101135a 140 WICKI | (printed name | hoin | s first dub | U OWORD | danaaa | and atota | that |
| ١, | | (printed name | | i ilist uur | Y SWUITI. | uenose. | and state | uiai. |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 34 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or $[\chi]$ is the <u>Assissment Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Melissa Nowicki

(Signature)

State of New York)

Assistant Vice President

County of _____ Signed and sworn to (or affirmed) before me this 1st day of March, 2017

) ss.

by <u>Melissa Nowicki</u>

NIWYUNC Notary Public for My commission expires:

Summer Young No. 01YO6287922 Notary Public, State of New York Qualified in Erie County My Commission Expires 8-26-2017

5



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pingora Loan Servicing, LLC |
|---------------------|-----------------------------|
| Jurisdiction* | Colorado |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Teresa Burke (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [____] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the Foreclosure Supervisor for Ceniar FSB, Servicer [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of /) ss.

Teresa Burke **Foreclosure Supervisor**

County of Signed and sworn to (or affirmed) before me this _ /<u>9_</u> day of M. RO M. RO Commission V. M. NO V. STT Dervisof Bucke Forect by Feresa Notary Public for 2 My commission expires: __ OR JACINDA M. ROWSON NOTARY PUBLIC OF NEW JERSEY My Commission Expires March 03, 2020 ID# 50010501 Form 300 V7/5/13

(Signature)



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Pingora Loan Servicing |
|---------------------|------------------------|
| Jurisdiction* | New York |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| ١, | Melissa Nowicki | (printed nam | e) bein | g first dul | y sworn, d | epose, | and state | that: |
|----|-----------------|--------------|---------|-------------|------------|--------|-----------|-------|
| | | | | | | | | |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Assistant Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Melissa Nowicki

Assistant Vice President

State of <u>New York</u>)

County of <u>Erie</u>) Signed and sworn to (or affirmed) before me this $1st day of March, __2017$

by <u>Melissa Nowicki</u>

Notary Public for Exe ounti My commission expires:

Summer Young No. 01YO6287922 Notary Public, State of New York Qualified in Erie County My Commission Expires 8-26-2017



Pioneer Trust Bank, NA Attn: Deryl Yunck P.O. Box 2305 Salem, OR 97308 DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Ploneer Trust Bank, NA |
|---------------------|------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Deryl Yunck (printed name) being first duly sworn, depose, and state that:

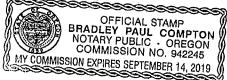
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifles that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Assistant Vice President/Compliance Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of SS.

County of <u>Marion</u>) Signed and sworn to (or affirmed) before me this <u>13th</u> day of <u>January</u>, <u>2017</u> by <u>Deryl Yunck</u> <u>Notary Public for</u> <u>Oregon</u> My commission expires: <u>9-14-19</u>





Planet Home Lending LLC Foreciosure Dept 321 Research Pkwy Ste 303 Meriden, CT 06450

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Planet Home Lending LLC |
|---------------------|-------------------------|
| Jurisdiction* | Connecticut |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Thomas O'Connell (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>10</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>Vice President</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) //;ce

State of <u>Connecticut</u>)) ss. County of <u>New Haven</u>) Signed and sworn to (or affirmed) before me this <u>135</u> day of <u>Shruch</u>, <u>Join</u>, by <u>Thomas O'Connell</u> <u>KAREN MCGETTIGAN</u>

Motary Public for _____ My commission expires: ____

NOTARY PUBLIC State of Connecticut My Commission Expires April 30, 2021

Plaza Home Mortgage, Inc. 4820 Eastgate Mall, Suite 100 San Diego, CA 92121 Attention: Loan Servicing

JAN 27

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Plaza Home Mortgage, Inc. |
|---------------------|---------------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Barbara Davidson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>7</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice President of Loan Servicing</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

 \sim (Signature) State of) ss. County of ____ Signed and sworn to (or affirmed) before me this _____day of by _____ Notary Public for ____ My commission expires: See attached Ca deifornia Jurat

CALIFORNIA JURAT

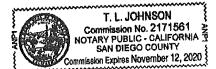
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)) County of San Diego)

Subscribed and sworn to (or affirmed) before me on this 26th day of January, 2017 by Barbara Davidson, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

Signature Ist John Son

(Seal)



Christian S Martin 3232 Newmark Drive Miamisburg, OH 45342

State of Ohio



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | PNC Bank, National Association | •• | • | | |
|---------------------|--------------------------------|----|---|--|--|
| Jurisdiction* | United State of America | | | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, _____ Christian S Martin _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____51 ____ [not to exceed 175].
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ Vice President. Late Stage Default ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

My commission expires:

(Signature)

Christian S. Martin Vice President

Ban K

NA

9-28-2021

) ss. County of <u>Montgomery</u>) Signed and sworn to (or affirmed) before me this \mathcal{A} day of hristian 5.1 by _ Notary Public for _ PWC



James P. Laurick Kilmer, Voorhees & Laurick, P.C. 732 NW 19th Avenue Portland, Oregon 97209

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Point Property Management, LLC |
|---------------------|--------------------------------|
| Jurisdiction* | Point Pleasant, NJ |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Michael Ruscica (printed name) being first duly swom, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>New Jersey</u>)) ss. County of <u>Ocean</u>) Signed and sworn to (or affirmed) before me this <u>28</u> day of <u>MARCh</u>, <u>2017</u> by <u>MIChAPEI RUSCICO</u> <u>Motary Public</u> for <u>STATE OS</u> <u>NS</u> <u>COUNTY</u> <u>SOCECU</u> My commission expires: <u>TOIY</u> <u>25</u> <u>2017</u> KATHLEEN STERNER Notary Public State of New Jersey My commission Expires Jul 25, 2017



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Polnt West Credit Union |
|---------------------|-------------------------|
| Jurisdiction* | Oregon ` |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Heather Noel (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 1_______[not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>VP Financial Solutions</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

HNOR

(Signature)

| State of <u>Oregon</u>) | | |
|---|--|--|
|) ss. | | |
| County of <u>Multnomah</u>) | | |
| Signed and sworn to (or affirmed) before me | this <u>12</u> day of <u>January</u> , <u>2017</u> | |
| by <u>Heather Noel</u> | · · · | |
| | KANA | |
| | Notary Public for OREGON | |
| OFFICIAL STAMP | My commission expires: MAY 10 2020 | |
| KATHERINE ELIZABETH MATSEN NOTARY PUBLIC-OREGON COMMISSION NO. 949855 MY COMMISSION EXPIRES MAY 10, 2020 | , | |

Portland Development Commission Altn. Karen Harris 222 NW 4th Avenue Portland, OR 97209



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Portland Development Commission, the urban renewal authorily |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized

I, Eric Iverson (printed name) being first duly sworn, depose, and st

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under (Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual to commence the following number of actions to foreclose a residential trust deed by advertiseme sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date affidavit: -0-_____ [not to exceed 175];

(Signature)

Slale of OREGON) ss. County of Multnomah) Signed and sworn to (or affirmed) before me this 2017 day of January by Eric Iverson, as General Counsel of Portland Development Commiss ion Notary Public lor-OREG OFFICIAL STAMP KAREN L HARRIS My commission expires: NOTARY PUBLIC-OREGON COMMISSION NO. 945169 MY COMMIDSION EXPIRES NOVEMBER 29, 2019

Portland Local 8 Federal Credit Union 2435 NW Front Ave Suite A Portland OR 97209

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Portland Local 8 Federal Credit Union |
|---------------------|---------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jaimie Garver (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Chief Executive Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

me Flawer

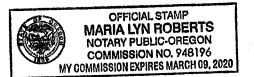
State of <u>Oregon</u>)

County of <u>Multhomah</u>) Signed and sworn to (or affirmed) before me this 2π day of <u>January</u>, <u>2017</u> by <u>Jaumie Garver</u>

Maria Dolett

My commission expires: ________ Murch 9, 2020

Notary Public for ______



Premier Community Bank 314 E Main St Hillsboro OR 97123

eceive JAN 18 2017

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Premier Community Bank | |
|---------------------|------------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Fred Johnson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [w] is the Executive Vice President [insert title]] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of Oregon) ss. County of <u>Washington</u>) Signed and sworn to (or affirmed) before me this 11^{+5} day of January 2017 by Fred Johnson, Executive Vice President of Premier Community Bank Notary Public for STATE DF. OREGUN My commission expires: OFFICIAL STAMP BARBARA ANN COLSON NOTARY PUBLIC - OREGON COMMISSION NO. 947324 MY COMMISSION EXPIRES FEBRUARY 10, 2020

DECEIVED N FEB 07 2017

Teresa Sutton PrimeLending 18111 Preston Rd #900 Dallas, TX 75252

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | PrimeLending, A PlainsCapital Company |
|---------------------|---------------------------------------|
| Jurisdiction* | Texas |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Teresa Sutton, Sr. Vice President (printed name) being first duly sworn, depose, and state that:

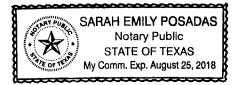
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Sr. Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Tensa Sutto.

(Signature)

State of <u>Texas</u>)) ss. County of <u>Dallas</u>) Signed and sworn to (or affirmed) before me this <u>3rd</u> day of <u>February</u>, <u>2017</u> by <u>Sarah Emily Posadas</u>.



Notary Public for <u>Dallas County, Texas</u> My commission expires: <u>August 25, 2018</u>

Providence Federal Credit Union 6400 SE Lake Rd Suite 125 Milwaukie OR 97222



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Providence Federal Credit Union |
|---------------------|---------------------------------|
| Jurisdiction* | State of Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Tina Narron</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

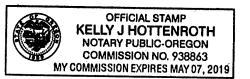
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√_] is the <u>Chief Executive Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)) ss.

County of <u>Clackamas</u>)

| Signed and sworn to (or affirmed) before me this <u>17th</u> day | of January | , <u>2017</u> |
|--|-------------------|---------------|
| by Tina Narron, Chief Executive Officer for Providence Fede | eral Credit Union | |
| | Dt tote | tton |



Notary Public for <u>Oregon</u> My commission expires: <u>May 7, 2019</u>

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Provident Funding Associates, L.P. |
|---------------------|------------------------------------|
| Jurisdiction* | California |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jessica L Praniewicz (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>13</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [__] is the <u>Assistant Vice President</u> [insert tille] of the entity claiming

exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

urrien <u>J</u>e gnature) Pernsy lumin) State of) ss. Allecher County of Signed and sworn to (or affirmed) before me this <u>Man</u> day of Jessica by 📋 L. Freniewicz Durtar Arre Notary Public for Stan DWISC My commission expires: COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL STACEY DEUTSCH Nolary Public PITTSBURGH CITY, ALLEGHENY COUNTY My Commission Expires Jul 18, 2017 Form 300 V7/5/13

Qualstar Credit Union PO Box 96730 Bellevue, WA 98009



DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Qualstar Credit Union |
|---------------------|-----------------------|
| Jurisdiction* | Washington State |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Robert D. Arbuckle (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>none</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the <u>Chief Lending Officer</u> *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

1. lunke

(Signature)

State of Washington)) ss. County of Signed and sworn to (or affirmed) before me this <u>4th</u> day of <u>Januarc</u> Kobert D bv ′ Notary Public for Withington My commission expires:

Quicken Loans Inc Stephanie P. Orrico - Default Servicing 1001 Woodward Ave Detroit, MI 48226



DEPARTMENT OF JUSTICE OREGON FORECLOSURE AVOIDANCE PROGRAM **BENEFICIARY EXEMPTION AFFIDAVIT**

| Lender/Beneficiary: | Quicken Loans Inc |
|---------------------|-------------------|
| Jurisdiction* | Michigan |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| Stephanie P. Orrico (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence, the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: 21 Inot to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [1] is the Loss Mitigation Officer _ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and Is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Michigan) SS. County of Wayne) Signed and sworn to (or affirmed) before me this _____ day of _____ by Stephanie P. Orrico

KRIBTIN WYKOWSKI Notary Public, State of Michigan County of Macomb My Commission Expires May 24, 2017 Acting in the County of

Notary Public for 2MQComb County MI <u>a</u>chng My commission expires:

DECEIVED JAN 09 2017

P O Box 3020 1418 15th Avenue Longview, WA 98632

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Red Canoe Credit Union |
|---------------------|------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Marcos Ramirez</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>3 (three)</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the _____Special Assets Manager ______[insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

(Signature) by: Marcos Raminez Special Assers Mana Managen State of) SS, County of (and Signed and sworn to (or affirmed) before me this day of by Ma Notab/Public for (A TIFFANY A GEHRMAN WILLIAMS **Notary Public** My commission expires: U State of Washington My Commission Expires May 25, 2017



Karen Griffis, Senior Vice President Regions Bank dba Regions Mortgage 215 Forrest Street Hattiesburg, MS 39401 DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | REGIONS BANK DBA REGIONS MORTGAGE |
|---------------------|-----------------------------------|
| Jurisdiction* | STATE OF ALABAMA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, KAREN GRIFFIS, SENIOR VICE PRESIDENT, (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a clalm of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [✓] is the <u>SENIOR VICE PRESIDENT</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of MISSISSIPPI)

) ss.

County of <u>FORREST</u>) Signed and sworn to (or affirmed) before me this <u>25th</u> day of <u>January</u>, <u>2017</u> by <u>Karen Griffis, Senior Vice President of Regions Bank dba Regions Mortgage</u>

Notary Public for <u>STATE OF MISSISSIPPI</u> My commission expires: <u>JULY 31, 2020</u>



Reverse Mortgage Solutions, Inc. 14405 Walters Road, Suite 200 Houston, TX 77014



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Reverse Mortgage Solutions, Inc. |
|---------------------|----------------------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jorge Valadez (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____46____[not to exceed 175];

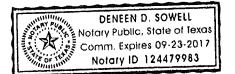
5/4/17 (Signature)

State of <u>Texas</u>)

County of ______

Signed and sworn to (or affirmed) before me this <u>4th</u> day of <u>May</u>, <u>2017</u> by <u>Jorge Valadez, Vice President of Reverse Mortgage Solutions, Inc.</u>

Aeneen of Arine



| Notary Public for | ris County, Texas |
|-------------------|-------------------|
| • | - |



Stayton Law P O Box 248 Stayton OR 97383

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Richard P. Koenig | |
|---------------------|-------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

, Richard P. Koenig _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _ 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [XX] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or l is the _ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Kichard P. Koenig

(Signature)

State of Oregon

Cou

| County of <u>Marion</u>) | (h) |
|---|-----------------------------|
| Signed and sworn to (or affirmed) before me | this 20 day of Canuary 2017 |
| by Richard P. Koenig | 111, 200 |
| • | hill nah a Mandu |



) SS.

Oregon Notary Public for 7-17-18 My commission expires:

Hershner Hunter, LLP Attn: L. Summers PO Box 1475 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Richard S. Vaupel and Sherrae M. Vaupel |
|---------------------|---|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Richard S. Vaupel (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>o</u>_____[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

| [1] is the individual claiming exemption from requirements | s established under Or Laws 2013, ch 304, or |
|--|---|
| [] is the | [insert title] of the entity claiming |
| exemption from requirements established under Or Laws 20 | 013, ch 304, and is authorized by such entity |
| to execute this affidavit on its behalf. | |

Notary Public for <u>Oregor</u> My commission expires:

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Douglas</u>) Signed and sworn to (or affirmed) before me this <u>6</u> day of <u>March</u>, <u>2017</u> by <u>Richard S. Vaupel</u>





Stayton Law P O Box 248 Stayton OR 97383

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Richard Seales |
|---------------------|----------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, _____Richard Seales ______ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: ________[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [XX] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)) ss. County of <u>Lone</u>) Signed and sworn to (or affirmed) before me this <u>30</u> day of <u>Solution</u>, <u>2017</u> by <u>Richard Seales</u> OFFICIAL SEAL TAMMAY MARIE MCKENZIE NOTARY PUBLIC - OREGON My commission expires: <u>4-13-19</u>

COMMISSION NO. 937519 MY COMMISSION EXPIRES APRIL 13, 2019

MONSON LAW OFFICE P.C. 1865 NW 169th Place, Suite 208 Beaverton, OR 97006



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Rivermark Community Credit Union |
|---------------------|----------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Scott Burgess _____ (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: Seven [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ [insert title] of the entity claiming [√] Is the President/CEO exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Oregon) ss.

County of Washington)

Signed and sworn to (or affirmed) before me this 18^{11} day of January 2017 by Scott A Burgess

OFFICIAL STAMP BONNIE ELIZABETH DIBB NOTARY PUBLIC + OREGON COMMISSION NO. 927153 MY COMMISSION EXPIRES APRIL 16, 2018

| Den E Bbb | |
|---------------------------------|------|
| Notary Public for Strute OF Ora | PAON |
| My commission expires:04/1 | |
| | |

Teri Baker, VP/Corporate Secretary Riverview Community Bank 900 Washington St., Suite 900 Vancouver, WA 98660



DEPARTMENT OF JUSTICE PORTLAND LEGAL OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Riverview Community Bank |
|---------------------|--------------------------|
| Jurisdiction* | Washington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Ron Wysaske, President/COO (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>President/COO</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

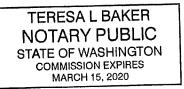
State of <u>Washington</u>)

) ss. County of <u>Ciark</u>)

Signed and sworn to (or affirmed) before me this <u>13th</u> day of <u>January</u>, <u>2017</u> by <u>Ron Wysaske, President/COO of Riverview Community Bank</u>

Geresal Baker

Notary Public for <u>Washington</u> My commission expires: <u>March 15, 2020</u>



÷ .



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | RLF MORTGAGE CORPORATION |
|-------------------------|--------------------------|
| Jurisdiction* | A TEXAS CORPORATION |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, GRANT A. HAMILTON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> ______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the _______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

 State of <u>TEXAS</u>)

) ss.

 County of <u>COLLIN</u>)

 Signed and sworn to (or affirmed) before me this <u>06</u> day of <u>JANUARY</u>, <u>2017</u>

 by <u>Grant A. Hamilton, Vice President</u>



| Christia 74 gones | |
|-----------------------------------|--|
| Notary Public for Collin County | |
| My commission expires: 05-27-2019 | |

DEPARTMENT OF JUSTICE

PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficlary: | Robert | Novara | |
|---------------------|--------|--------|--|
| Jurisdiction* | | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Vern L. Rask</u>, as <u>Conservator</u> (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [__] is the <u>Conserverse for the Indian Juscel</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

ADV. PIL (Signature)

My commission expires: May, 17, 2020

١

۱

State of Dregon)

County of <u>Clump</u>) Signed and sworn to (or affirmed) before me this <u>25th</u> day of <u>Sinuary</u>, <u>2017</u> by <u>Purri L. II.ask</u> OFFICIAL STAMP Notary Public for <u>Oregon</u>



AmeriTitle 405 First Street North Lakeview, OR 97630

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Roderick C. and Sherry K. Hoglan Family Trust u/t/a 06/23/15 |
|---------------------|--|
| Jurisdiction* | Lake County |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Roderick C. Hoglan & Sherry K. Hoglan (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [insert title] of the entity claiming [🗸] is the Trustees exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. (Sianaturé State of Oregon) ss. County of Malheur) day of June 2017 Signed and sworn to (or affirmed) before me this by Roderick C. Hoglan & Sherry K. Hoglan Allollo 7000 94 Notary Public for Oregon My commission expires:



Joseph E. Kellerman Hornecker Cowling LLP 14 N. Central Ave., Suite 104 Medford, OR 97501



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOID ANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Rogue Credit Union, successor in interest |
|---------------------|---|
| Jurisdiction* | Curry County |

*If Lender/Beneficiary is not a natural person, provIde the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Joseph E. Kellerman (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit² ______7 [not to exceed 175];

2. The undersigned further certifies that she/he: *[check only one of the following boxes]* [___] is the individual clalming exemption from requirements established under Or Laws 2013, ch 304, or [1] is the legal representative *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. (Signature) State of Oregon) ss. County of <u>Jackson</u>) Signed and sworn to (or affirmed) before me this 23^d day of March by JOSEPH E. Kellerman Mes OFFICIAL STAMP JUDITH KAY TOMES NOTARY PUBLIC-OREGON Notary Public for (NP My-commission expires: 201 COMMISSION NO. 939547 MY COMMISSION EXPIRES JUNE 01, 2019

AFTER RECORDING. RETURN TO:

Craig K. Edwards Francis Hansen & Martin LLP 1148 NW Hill Street Bend, OR 97703



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | ROY L. AND BETH A. REYNOLDS |
|---------------------|-----------------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>ROY L. RENOLDS and BETH A. REYNOLDS</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above-named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>zero</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[X] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

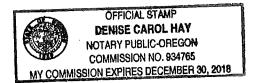
Rovt Reynolds State of Oregon

) SS.

Beth A. Reynolds

County of Deschutes

Signed and sworn to (or affirmed) before me this <u>*Alsr*</u> day of February, 2017 by Roy L. Reynolds and Beth A. Reynolds.



Notary Public for Oregon My commission expires: <u>13-30-18</u>



Seattle Bank 600 University Street Sulte 1850 Seattle, WA 98101-1129

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Seattle Bank |
|---------------------|--------------|
| Jurisdiction* | Washington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Lisa Jones (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named Individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Vice President and Loan Operations Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.



 State of <u>Washington</u>)

) ss.

 County of <u>King</u>)

 Signed and sworn to (or affirmed) before me this <u>26th</u> day of <u>January</u>, <u>2017</u>

 by <u>Susan R. Mitcheli</u>

Susan



Notary Public for <u>WA</u> My commission expires: <u>9/9/2019</u>



John W. Weil Tomasi Salyer Martin 121 SW Morrison St, Suite 1850 Portland, OR 97204

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Second Chance Home Loans LLC |
|---------------------|------------------------------|
| Jurisdiction* | Wyoming |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, S. William Lau (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the managing member [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

County of Muthnoruh)

Signed and sworn to (or affirmed) before me this <u>6th</u> day of <u>April</u>, <u>201</u>

| Anthon | y Bo | inna | 4 | |
|-------------------|-------|------|------------|------|
| Notary Public for | State | of | ORE | 900 |
| My commission exp | ires: | nn l | <u>1+h</u> | 2021 |



John W. Weil Tomasi Salyer Martin 121 SW Morrison St, Suite 1850 Portland, OR 97204

DEPARTMENT OF JUSTICE OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Second Chance Home Loans |
|---------------------|--------------------------|
| Jurisdiction* | Oregan |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>William L. Synos</u> (printed name) being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon

Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: __________[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

(Signature)

State of <u>ALJA</u>) State of <u>ALJA</u>) Signed and sworn to (or affirmed) before me this <u>A.J.</u> day of <u>JCMMM</u>, <u>AUI6</u> by <u>ANJANA</u> <u>Arcen</u> Notary Public for <u>State of Orean</u> My commission expires: <u>594ember</u> <u>23</u>23



Eric J. Kiley SELCO Community Credit Union P.O. Box 7487 Springfield, OR 97475

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | SELCO Community Credit Union |
|---------------------|------------------------------|
| Jurisdiction* | Oregon |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Eric J. Kliey (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Associate General Counsel</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

| (Signature) | |
|---|---|
| tate of <u>Oregon</u>) | |
|) SS. | |
| county of Lane) | |
| ligned and sworn to (or affirmed) before me this <u>13th</u> day of <u>January</u> , <u>2017</u> | |
| y Eric J. Kiley, Associate General Counsel of SELCO Community Gredit Union | |
| - Trillixt | |
| Notary Public for | |
| GINA D COONTZ My commission expires: March 10, 201 | ٦ |
| NOTARY PUBLIC-OREGON COMMISSION NO. 476409 | |
| MY COMMISSION EXPIRES MARCH 10, 2017 | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Selene Finance LP |
|---------------------|-------------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Gina Gray (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affillate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>11</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | BDar |
|-------------------------------|---|
| State of) | (Signature) Gina Gray |
| Duval) ss. County of) | |
| Signed and sworn to (or affin | ed) before me this 11 day of January , 2017 |
| by Gina G | |
| | Admir Imamovic |
| | Notary Public for Florida |
| | My commission expires: July 15 2018 |
| | Admir Imamovic COMMISSION # FF 141918 EXPIRES: JUL 15, 2018 BONDED THRU 181 FLORIDA NOTARY, LLC |

Butler & Looney, P.C. P.O. Box 430 Vale OR 97918



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Sharon Schweietzer |
|---------------------|--------------------|
| Jurisdiction* | Malheur |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I, Sharon Schweitzer

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

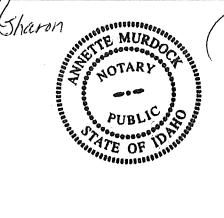
- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or 1 lis the [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Idaho

by Darwin Schweitzer

) ss. County of

Signed and sworn to (or affirmed) before me this $\frac{18}{18}$ day of



Notary Public for 5 20. My commission expires:

Hershner Hunter, LLP Attn: L. Summers PO Box 1475 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Richard S. Vaupel and Sherrae M. Vaupel |
|---------------------|---|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I. Sherrae M. Vaupel

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [1] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or _ [insert title] of the entity claiming [] is the exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

My commission expires:

State of Oregon

County of Douglas) Signed and sworn to (or affirmed) before me this day of March 2017 by Sherrae S. Vaupel

Notary Public for Oregon



) ss.

Slerra Pacific Mortgage Company, Inc. 1180 Iron Point Road, #200 Folsom, CA 95630 Attn: Scott Petko

DEPARTMENT OF JUSTICE OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Slerra Pacific Mortgage Company, Inc. |
|---------------------|---------------------------------------|
| Jurisdiction* | CalifornIa |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Paul Hubbard (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>4</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the Chief Financial Officer

 $[\checkmark]$ is the <u>Chief Financial Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

al bit allow

| (Olginatary) |
|---|
| State of) |
|) ss. |
| County of |
| Signed and sworn to (or affwaged) before me this day of |
| by with Calls |
|) ss. County of |
| Notary public for |
| Kay commission expires: |
| · · · · · · · · · · · · · · · · · · · |

JURAT

| 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. | |
|--|--|
| State of California | |
| County of Acramento SS. | 1 |
| Subscribed and sworn to (or affirmed) before me on t | his 6 day of Anuary, 20/17 |
| Dent Hulberry | _, proved to me on the basis of satisfactory evide |
| o be the person(s) who appeared before me. | |
| SHARON BARRICK COMM. # 2104082 NOTARY PUBLIC-CALIFORNIA PLACER COUNTY MY COLIM. EXP. MAR. 29, 2019 | Sham Antik |
| | |
| PLACE NOTARY SEAL IN ABOVE SPACE | CORMATION CONTRACTOR CONTRACTOR |
| The information below is optional. However, it may pro | |
| CAPACITY CLAIMED BY SIGNER (PRINCIPAL) | |
| The information below is optional. However, it may pro of this form to an unauthorized document. | ve valuable and could prevent fraudulent attachm |
| OPTIONAL INH The information below is optional. However, it may proof this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER PARTNER(S) TITLE(S) ATTORNEY-IN-FACT TRUSTEE(S) | ve valuable and could prevent fraudulent attachm DESCRIPTION OF ATTACHED DOCUMENT |
| OPTIONAL INH The information below is optional. However, it may proof of this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER PARTNER(S) TITLE(S) ATTORNEY-IN-FACT | ve valuable and could prevent fraudulent attachm DESCRIPTION OF ATTACHED DOCUMENT TITLE OR TYPE OF DOCUMENT |
| OPTIONAL INH The information below is optional. However, it may proof this form to an unauthorized document. CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL CORPORATE OFFICER PARTNER(S) TITLE(S) ATTORNEY-IN-FACT GUARDIAN/CONSERVATOR | ve valuable and could prevent fraudulent attachm DESCRIPTION OF ATTACHED DOCUMENT TITLE OR TYPE OF DOCUMENT NUMBER OF PAGES |

Silvergate Bank 4275 Executive Square, Suite 800 La Jolia, CA 92037 Attention: John Bonino



OREGON FORECLOSURE AVOIDANCE PROGRAM PORTLAND LEGAL BENEFICIARY EXEMPTION AFFIDAVIT

| Lender / Beneficiary | Silvergate Bank |
|----------------------|-----------------|
| Jurisdiction * | California |

* If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary Is organized.

i, John M. Bonino, being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [X] is the Executive Vice President of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Silvergate Bank

An M Bonen

John M. Bonlno

NOTARY JURAT

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.

State of California

County of San Dlego

Subscribed and sworn to (or affirmed) before me on this 18th day of January 2017, by John M. Bonino, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature

(Seal)

JUDITH M. KNOWLES Notary Public - California San Diego County Commission # 2159703 My Comm. Expires Aug 10, 2020

South Coast ILWU Federal Credit Union 2438 Broadway North Bend OR 97459



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | South Coast ILWU Federal Credit Union | |
|---------------------|---------------------------------------|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Julee A Yoakam (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the Manager/CEO [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | (Sighature) | |
|---|---|--------|
| State of <u>Oregon</u>)) ss. | | |
| County of <u>Coos</u>) Signed and sworn to (or affirmed) before me by <u>Julec A. YoaKam</u> | this <u>3rd</u> day of <u>January</u> | , 2017 |
| OFFICIAL STAMP CINDY ANNE CRIGER NOTARY PUBLIC-OREGON COMMISSION NO. 956428 MY COMMISSION EXPIRES NOVEMBER 08, 2020 | Conductor A. Criger Notary Public for Oregon My commission expires: 11.8.20 | |



SOUTH PACIFIC FINANCIAL CORPORATION ATTN: BOB PICKHAM 10737 LAUREL ST, STE 200 RANCHO CUCAMONGA, CA 91730

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | SOUTH PACIFIC FINANCIAL CORPORATION |
|---------------------|-------------------------------------|
| Jurisdiction* | CALIFORNIA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, ROBERT PICKHAM (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>2</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_✔] is the <u>CHIEF FINANCIAL OFFICER</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | | (Signature) |
|--------------------|-----------------------|------------------------|
| State of |) | |
| |) ss. | |
| County of | | |
| Signed and sworn t | o (or affirmed) befor | re me this day of |
| by | | |
| | | (See Attached) |
| | | Notary Public for |
| | | My commission expires: |

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

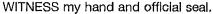
CIVIL CODE § 1189

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 truthfuiness, accuracy, or validity of that document.

State of Callfornia County of nn1 UNSULA Notany Public before me, Here Insert Name and Title of the Officer personally appeared Name(s) of Signer(s)

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(les), 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 Callfornia that the foregoing paragraph Is true and correct.



CHRISTINA M. MUNGUIA Commission # 2116673 Notary Public - California San Bernardino County My Comm. Expires Jun 21, 2019

Signature Cristing M. Mungula Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

| Description of Attached Document | | |
|---------------------------------------|-----------------------------------|----|
| Title or Type of Document: | Document Date: | |
| Number of Pages: Signer(s) Other Than | | |
| Capacity(ies) Claimed by Signer(s) | | • |
| Signer's Name: | Signer's Name: | |
| Corporate Officer - Title(s): | Corporate Officer — Title(s): | |
| Partner – Limited General | Partner – LimIted General | |
| 🗆 Individual 👘 🗋 Attorney in Fact | 🗆 Individual 🛛 🖾 Attorney In Fact | |
| Trustee Guardian or Conservator | Trustee Guardian or Conservat | or |
| Other: | □ Other: | |
| Signer Is Representing: | Signer Is Representing: | |
| | | |

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Michelle M Bertolino (EC) Farleigh Wada Witt 121 SW Morrison St. Sulte 600 Portland, OR 97204

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | St Helens Community Federal Credit Union |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| I, <u>Steve Jensen</u> (printed name) being first duly sworn, depose, an |
|--|
|--|

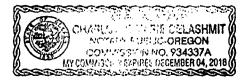
This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1 (one)</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [✓] is the <u>V.P. of Lending</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

County of <u>Columbia</u>) Signed and sworn to (or affirmed) before me this <u>17th</u> day of <u>January</u>, <u>2017</u> by <u>Steve Jensen as VP of Lending at St Helens Community Federal Credit Union</u>, *Chewbork*



| Charlotte Delashmit |
|--------------------------------|
| Notary Public for Oreaun |
| My commission expires: 12/4/18 |
| |

State Farm Bank[®]

State Farm Bank P.O. Box 2328 Bloomington, Illinois 61702-2328

After recording, return to:

State Farm Bank, FSB PO Box 2328 4th Floor, Home Equity Processing Bloomington, IL 61702-2328



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | State Farm Bank, F.S.B. |
|---------------------|-------------------------|
| Jurisdiction* | Illinois |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Cassandra Wheatley (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>5</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | if head it | |
|--|--|--------|
| (5 | Signature) | |
| State of <u>Illinois</u>) | | |
|) ss. County of <u>McLean</u>) | Assistant Secretary ate Farm Bank, F.S.B. | |
| Signed and sworn to (or affirmed) before me this | <u>30</u> day of <u>January</u> | , 2017 |
| by <u>Valerie Winters</u> | Calis | , |
| Ň | Notary Public for <u>State of Illinois</u> | |
| ſ | Лу commission expires: <u>8 17 19</u> | |
| | OFFICIAL SEAL Valerie Winters NOTARY PUBLIC - STATE OF ILLINOIS My Commission Expires 8/17/2019 | |





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Stearns Lending, LLC |
|---------------------|----------------------|
| Jurisdiction* | California |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

, Ed Parikh (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.735 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>3</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [[]] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [[]] is the <u>VP-Loan Servicing Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | Serle. |
|---|-------------------|
| | (Signature) |
| State of) ss. | · Ard |
| County of) Signed and sworn to (or affirmed) before me by | this day of |
| Aline Ald Ber | Notary Public for |

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. State of California. County of <u>*MRAMA</u></u></u>* Subscribed and sworn to (or affirmed) before me on this $\frac{3^{44}}{20}$ day of Man 20/7, by FallAkike proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. MICHELE E. KLEE Commission # 2141466 Notary Public - California Orange County My Comm. Expires Feb 2, 2020 Signature Seal



Tankersley, Wright & Strunk LLC 701 NE Evans Street McMinnville, OR 97128 DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Steve Aaron |
|---------------------|-------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Steve Aaron (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the ______ [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Two Ram

State of <u>Oregon</u>)) SS. County of <u>Yamhill</u>) Signed and sworn to (or affirmed) before me this <u>2</u> day of <u>May</u>, <u>2017</u> by <u>Steve Aaron</u>. Notar Public for <u>Orego</u> My commission expires: <u>1918</u>

MY COMMISSION EXPIRES JANUARY 09, 2018

STEVE HANSON LEWIS HANSON & CO INC PO BOX 766 ALBANY OR 97321



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | STEVE HANSON |
|---------------------|--------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, STEVE HANSON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [√] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [_] is the _______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>OREGON</u>)) ss. County of <u>BENTON</u>) Signed and sworn to (or affirmed) before me this <u>20</u> day of <u>JANUARY</u>, <u>2017</u> by <u>STEVE HANSON</u> OFFICIAL STAMP HACHEL KAE NEBEKER HACHEL KAE NEBEKER HACHEL KAE NEBEKER HACHEL KAE NEBEKER NOTARY PUBLIC OREGON NOTARY PUBLIC OREGON NOTARY PUBLIC OREGON My commission expires: <u>10/4/2020</u>

Special Default Services, Inc. 17100 Gillette Ave. Irvine, CA 92614



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | STRATTON ASSOCIATES LLC EMPLOYEE PROFIT SHARIN |
|---------------------|--|
| Jurisdiction* | Federal - 40112 |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction In which the Lender/Beneficiary Is organized.

I, Alan Stretton (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_X] is the <u>7^asfee</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

ΤÉ

(Signature)/

State of Ultah) ss. County of Utah) Signed and sworn to (or affirmed) before me this ____ day of 201 Javis by Notary Public for 020 My commission expires: AMY M DAVIS NOTARY PUBLIC - STATE OF UTAH ty Comm, Exp. 08/02/2020 Commission # 690151

Cassie K. Jones P.O. Box 1147 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Summit Bank |
|---------------------|-------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| L | Casey Hill | (printed name) |) being first dul | v sworn, de | enose | , and state that: |
|----|------------|----------------|-------------------|---------------------|-------|-------------------|
| ۰, | | (princou numo) | boing mot due | <i>y</i> on only ac | poo o | |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ____0 ____ [not to exceed 175];

7/824 Summit Bank

State of <u>Oregon</u>)) ss. County of <u>Lane</u>) Signed and sworn to (or affirmed) before me this <u>10th</u> day of <u>February</u>, <u>2017</u> by <u>Casey Hill</u>, <u>as chief Credit officier of Summit Bank</u>

OFFICIAL STAMP KRISTY KATHLEEN SAMEK NOTARY PUBLIC – OREGON COMMISSION NO. 936540 COMMISSION EXPIRES FEBRUARY 23, 2019

| Utrick | OT SUMMIT BOULS | |
|-----------------|-----------------|--|
| Sinterit | Sattillin James | |
| Notary Public f | | |
| | expires:3/19 | |
| | | |

. DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM

BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | SunTrust Mortgage, Inc |
|---------------------|------------------------|
| Jurisdiction* | Virginia |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Priscilla L. Fredlund (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>8</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Assistant Vise President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

and I Tedler

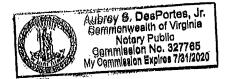
(Signature)

State of Virginia)

County of City of Richmond

Signed and sworn to (or affirmed) before me this <u>30th</u> day of <u>January</u>, <u>2017</u> by <u>Priscilia L. Fredlund</u>

My commission expires: _____



) \$\$, .

Michelle M. Bertolino 121 SW Morrison Street, Suite 600 Portland, OR 97204



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Sunset Science Park FCU |
|---------------------|-------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Rhonda Baggarley (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____0 _____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 - [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the <u>President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

hmda K Saggarlu

State of <u>Orego</u>)) ss.

| County of Washington | |
|---|---|
| Signed and sworn to (or affirmed) before me | e this 12 - day of <u>Ganuary</u> , <u>2017</u> |
| by Rhonda Baggarien | |
| | (Imples Faring |
| | Notary Public for State of Oregon |
| OFFICIAL STAMP | My commission expires: 12/13/2020 |



JAN 23 2017

TI AND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | SunTrust Bank |
|---------------------|---------------|
| Jurisdiction* | Georgia |

*If Lender/Beneficiary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, William T. Fowler (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: two [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Virginia</u>)

) ss.

County of <u>Richmond</u>)
Signed and sworn to (or affirmed) before me this <u>20th</u> day of <u>January</u>, <u>2017</u>
by <u>William T. Fowler</u>

Notary Public for <u>Commonweath of Virginia</u> My commission expires: <u>1/31/201820</u>





Law Office of Paul Heatherman PC PO Box 8 Bend, OR 97709

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Susan Heinz |
|---------------------|-------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Susan Heinz (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ____0 ____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [✓] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the _______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Notary Public for Oregon

My commission expires: ______

(Signature)

State of <u>Oregon</u>)) ss, County of <u>Crook</u>) Signed and sworn to (or affirmed) before me this <u>18</u> day of <u>1000</u>, <u>2017</u> by <u>Susan Heinz</u>



78 2019



SYLVIA G. BARTHOLOMEW AND VIC BARTHOLOMEW, WITH THE RIGHT OF SURVIVORSHIP 16978 SW VILLA RD SHERWOOD, OR 97140

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Sylvia G. Bartholomew and Vic Bartholomew,with the right of * | * survivorship |
|---------------------|---|----------------|
| Jurisdiction* | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. VIC BARTHOLOMEN (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit; 0 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [\checkmark] is the __L<u>GHUDGTZ</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State o) SS. County of (or affirmed) before me this $_{\sim}$ day 6 Signed and sworn-to by Notary Public for 0 My commission expires: OFFICIAL STAMP JENNIFER HEASLEY NOTARY PUBLIC-OREGON COMMISSION NO. 955710 MY COMMISSION EXPIRES OCTOBER 19, 2020



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Syncretic Financial, Inc. | |
|---------------------|---------------------------|--|
| Jurisdiction* | California | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Sandra Grouf being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter304, §2(1)(b).

- 2. The undersigned further certifies that she/he:[check only one of the following boxes] [_X__]is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [__]is the______[insert title] of the entity claiming exemption from requirements established under Or Laws 2013/ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | (Signature) | |
|----------------------------|-----------------------------------|---|
| State of |) | |
| |)ss. | |
| County of |) | |
| Signed and sworn to (or by | affirmed) before me this day of , | |
| | Notary Public for See affeched. | - |

| Notary Public for_ | See | attached. |
|--------------------|---------|-----------|
| My commission e | xpires: | |

| ACKNOWLEDGMENT |
|---|
| 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. |
| State of California County ofSolano) |
| On <u>June 26th 2017</u> before me, <u>Kaila Hansen, Notary Public</u> (insert name and title of the officer) |
| (insert name and title of the officer) |
| personally appeared Sarana Group |
| 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/he/their authorized capacity(ies), and that by his/he/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 California that the foregoing paragraph is true and correct. |
| WITNESS my hand and official seal. |
| signature Jana Mayon (Seal) 4265 Saint Louis RD Beneficiary Exempt Afficiant |

TCF National Bank Attn: Rosey Dickey, PCC-2E-D 1405 Xenium Lane North Plymouth, MN 55441



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | TCF National Bank |
|---------------------|-------------------|
| Jurisdiction* | United States |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Rosey Dickey (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>ZERO</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

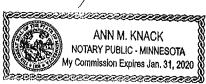
[__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [__] is the <u>Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

day of

(Signature)

State of \underline{M}) ss.

County of $\frac{K_{B}}{M}$ (or affirmed) before me this _ by $\frac{M}{M}$ (or $\frac{M}{M}$)



Notary Public for My commission expires:

Teamsters Council #37 FCU 1866 N.E. 162nd Ave Portland, Or 97230



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Teamsters Council #37 Federal Credit Union | |
|---------------------|--|--|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Vicki R Allison (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 $[\checkmark]$ is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or $[\checkmark]$ is the <u>Collector/Supervisor</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>Oregon</u>)

) ss. County of <u>Multnomah</u>)

 Signed and sworn to (or affirmed) before me this 12 day of January , 2017

 by Vicki R. Allison as Collector of Teamsters Council #37 FCU

 Christie K Thorsrud
 Christie K Thorsrud

 OFFICIAL SEAL
 Notary Public for Oregon/Teamsters Council #37 FCU

 OFFICIAL SEAL
 My commission ovairation



AFTER RECORDING, RETURN TO: Erich M. Paetsch, OSB# 993350 Saalfeld Griggs PC P. O. Box 470 Salem, Oregon 97308-0470 Telephone: (503) 399-1070



DEPARTMENT OF JUSTICE

PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| LENDER/BENEFICIARY: | THE DESANTIS FAMILY LIMITED PARTNERSHIP |
|---------------------|---|
| JURISDICTION: | N/A |

I, Lena M. Rutherford, General Partner of The DeSantis Family Limited Partnership, being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under ORS 86.726(1)(b).

1. The above named entity, The DeSantis Family Limited Partnership, commenced or caused an affiliate or agent to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.7S2 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: Zero (0);

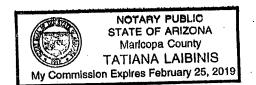
The undersigned further certifies that she is the General Partner of The DeSantis Family 2. Limited Partnership, the entity claiming exemption from requirements established under ORS 86.726(1)(b), and is authorized by such entity to execute this affidavit on its behalf.

DATED this / day of March, 2017.

The DeSantis Family Limited Partnership By: Lena M. Rutherford, General Partner

Maricopally Arizona R STATE OF County County

SUBSCRIBED AND SWORN before me on the 12 day of March, 2017 on behalf of The DeSantis Family Limited Partnership by Lena M. Rutherford, General Partner.



end Rutherand Notary Public for Arizonat My commission expires:

EXEMPTION AFFIDAVIT (2017)



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | The Money Source Inc |
|---------------------|----------------------|
| Jurisdiction* | New York |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Rick Smith</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 6______[not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [V] is the <u>Executive Vice President</u> exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Connectic.d)

County of New Marcel

) SS.

Signed and sworn to (or affirmed) before me this <u>2</u> day of <u>January</u>, <u>2017</u> by <u>Clek Smith</u>

Notary Public for The Manuel Source

SUZANNE J. SURPRENANT NOTARY PUBLIC CONNECTICUT MY COMMISSION EXPIRES 07/31/2017

Thrivent Federal Credit Union 122 East College Avenue, Ste: 1E Appleton, WI 54911-5741 Attention: Collections



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Thrivent Federal Credit Union |
|---------------------|----------------------------------|
| Jurisdiction* | Federally Chartered Credit Union |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Kimberly Kogler (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 88.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0______</u>[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>VP Mortgage Operations Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signaturé)

State of Minnesota)

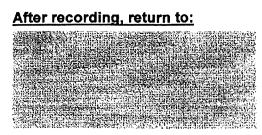
) ss. County of <u>Hennepin</u>)

Signed and sworn to (or affirmed) before me this <u>8th</u> day of <u>January</u>, <u>2015</u>

by Amanda M Zastrow



Notary Public for <u>Minnesota</u> My commission expires: <u>1-31-2016</u>





DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

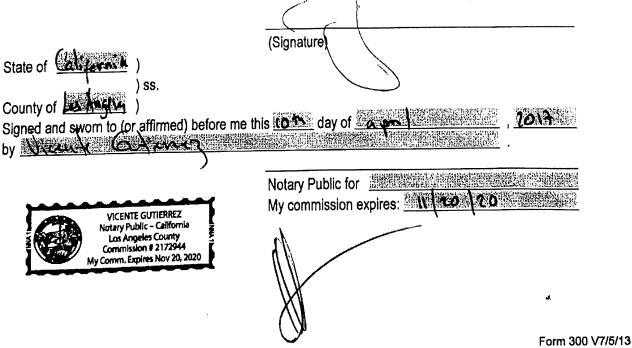
| Lender/Beneficiary: | TOM BLOCK |
|---------------------|-----------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he; [check only one of the following boxes] [I] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [I] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [II] is the Individual claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.



Scanned by CamScanner

PETER C. MCCORD 5 CENTERPOINTE DRIVE #240 LAKE OSWEGO, OR 97035



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | TRAILHEAD FEDERAL CREDIT UNION |
|---------------------|--------------------------------|
| Jurisdiction* | OREGON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, GAIL JAMES (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by sult under ORS 88.010 during the calendar year preceding the date of this affidavlt: <u>0</u> [not to exceed 175],

2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [] is the <u>EXECUTIVE VICE PRESIDENT</u> [Insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>OREGON</u>)

) ss. UNIT OF MULTNOMAH

County of <u>MULTNOMA</u>H Signed and swom to (or affirmed) before me this <u>B</u> day of <u>FUDNUM</u>, <u>2017</u> by <u>GAIL JAMES</u>



Notary Public for OREGON My commission expires:

RECEIVED

After recording, return to:

Trifera, LLC c/o Weinstein & Riley, P.S. 2001 Western Ave., Suite 400 Seattle, WA 98121

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Trifera, LLC |
|---------------------|--------------|
| Jurisdiction* | Delaware |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Alex Phillips</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Authorized Representative</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Washington</u>)) ss. County of <u>KING</u>) Signed and sworn to (or affirmed) before me this <u>5th</u> day of <u>June</u>, <u>2017</u> by <u>Alex Phillips, Its Authorized Representative</u> GRAEF With the state of Washington Notary Public for <u>State of Washington</u> My commission expires: <u>September 2, 2017</u>



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | TruHome | Solutions | LLC. |
|---------------------|----------|-----------|------|
| Jurisdiction* | Missouri | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>MICHAEL EGGLESTON</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [__] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Son tor Vice</u> <u>Frest Cont</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of Kansas)) ss. County of Johnson) Signed and sworn to (or affirmed) before me this 21st day of April , 2017 K. Hadenpeld Notary Public for <u>State</u> of My commission expires: <u>-3 | 19 | 30</u> **KRISTIE K HADENFELD** Notary Public - State of Kansas My Appointment Expires <u>8/19/20</u>



OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | TTG HoldINGS LLC |
|---------------------|------------------|
| Jurisdiction* | OREGON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, ALAN J. STRATTON (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: ______ [not to exceed 175];

(Signature) State of Utah) ss. County of Utah) Signed and sworn to (or affirmed) before me this 8 day of June 2017 by Alan Stratton Notary Public for State of Utah KENNETH WRIGHT My commission expires: 10/17/2020 Notary Public - State of Utah Comm. No. 691304 Commission Expires on Ocl 17, 2020

TwinStar Credit Union Attn: Account Solutions PO Box 718 Olympia, WA 98507

| D | EC | EIV | FI | \square |
|-----------|-----|---------|----|-----------|
| \square | JAN | 11 2017 | | Sant |

DEPARTMENT OF JUSTICE PORTLAND LEGAL OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | TwinStar Credit Union |
|-------------------------|-----------------------|
| Jurisdiction* | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Celeste Erlckson (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreciose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 [not to exceed 175].

2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>Account Solutions Operations Supervisor</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of <u>WA</u>)) ss.

County of <u>THURSTON</u>) Signed and sworn to (or affirmed) before me this <u>11TH</u> day of <u>JANUARY</u>, <u>2017</u> by <u>CELESTE ERICKSON</u> commission expires: <u>3 19 2077</u> by <u>CELESTE ERICKSON</u> by <u>CELESTE ERICKSON</u> commission expires: <u>3 19 2077</u> by <u>CELESTE ERICKSON</u> commission expires: <u>3 19 2077</u>

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | U.S. Bank national Association, not in its Individual Capacity but solely as Trustee for SW REMI | ic 2014-2 |
|---------------------|---|-----------|
| Jurisdiction* | Delaware | |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| i | Gina Gray | (printed name) being first duiv sworn, depose, and state that: |
|---|-----------|---|
| | | יטווונכע המווכז טכווע וויסג עעוץ פאיטווו, עכטטפכ, מווע פנמנכ נוומנ. |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _______ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [__] is the ______ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.
 Selene Finance LP as Attorney-in-Fact

Gina Gray (Signature) SeniorVice President State of Florida)) ss. County of NVa Signed and sworn to (or affirmed) before me this 25 day of JA Gina Gray by _ Lori Richard Florida Jacksonville Notary Public for My commission expires:



David M. Blanc Attorney at Law P.O. Box 218 Pendleton, OR 97801 RECEIVED JAN % 6 2017

> DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Umatilla County Federal Credit Union |
|---------------------|--------------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provIde the state or other junsdiction In which the Lender/Beneficiary is organized.

i, Kelly O'Malley (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [____] is the <u>Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Keery E. Snarlys

(Signature)

State of <u>OREGON</u>)) ss.

County of <u>Umatilla</u>)
Signed and sworn to (or affirmed) before me this <u>////</u> day of <u>January</u>, <u>2017</u>
by <u>Kelly O'Malley</u>.



| (1, n) |
|---|
| Notary Public for Oregon 110111 de Lee KREUUR |
| My commission expires: 197725720 |
| |

RECEIVED

After recording, return to:

Umpqua Bank Investor & Portfolio Services 13535 SW 72nd Ave, Suite 200 Tigard, Or 97223

DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Umpqua Bank |
|---------------------|-------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Jay P Mortensen (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit; 29 [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>SVP, Loan Administration & Servicing Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of _O K

) ss. County of <u>Washington</u> Signed and sworn to (or affirmed) before me this <u>20</u> day of <u>January</u>, <u>2017</u> by <u>Jay Mortensen</u> <u>Zimida</u> alayne Remain Notary Public for State of Oregon

My commission expires: Octo



MONSON LAW OFFICE P.C. 1865 NW 169th Place, Suite 208 Beaverton, OR 97006



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | United Advantage Northwest Federal Credit Union | | |
|---------------------|---|--|--|
| Jurisdiction* | Oregon | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Rebecca Baier</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

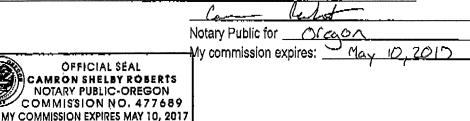
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Oregon</u>)

County of <u>Washington</u>)

Signed and sworn to (or affirmed) before me this <u>23rd</u> day of <u>January</u>, <u>2017</u> by <u>Rebecca Baier</u>.

Signature)



Michael T. Davis 12220 SW First St. Beaverton, OR 97005



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | United Guaranty Residential Insurance Co. of North Carolina | | | | |
|---------------------|---|--|--|--|--|
| Jurisdiction* | North Carolina | | | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Michael T. Davis (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>4</u>________[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Attorney</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

| | (Signature) | <u> </u> |
|---|--|---------------|
| State of <u>Oregon</u>) | | |
|) ss. | | |
| County of <u>Washington</u>) | | |
| Signed and sworn to (or affirmed) before me th | is <u>26</u> day of <u>April</u> | <u>, 2017</u> |
| by Michael T. Davis | | |
| | Christica E.K | |
| | Notary Public for Oregon | |
| OFFICIAL STAMP JESSICA ECK NOTARY PUBLIC - OREGON COMMISSION NO. 941751 MY COMMISSION EXPIRES AUGUST 25, 2019 | My commission expires: <u>\$/25/19</u> | |



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | United Security Financial Corp. | | |
|---------------------|---------------------------------|--|--|
| Jurisdiction* | Utah | | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

| ۱. | Dana Powell | (printed name |) bein | a first dub | v sworn de | nose | and state | that [,] |
|----|-------------|---------------|--------|-------------|-------------|-------|-----------|-------------------|
| '' | | (printoù numo | | g mot dui | y oworn, uc | ρουο, | | սապ |

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 5χ ($_{O}$) [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_X] is the AUP Deface A Quality Assurante [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of North Carolina

) ss.

Mecklenburg County My Commission Expires October 20, 2020 (Signature) by: RoundPoint Mortgage Servicing Corporation as servicer for United Security Financial Corp.

County of Mecklenburg) Signed and sworn to (or affirmed) before me this 13th day of _______ 2017 by Dana Knuell recklenburg Notary Public for My commission expires: _(JESSICA H LUSK Iotary Public, North Carolina

UNITUS PLAZA BRANCH BEAVERTON BRANCH SALEM BRANCH PETERKORT BRANCH TANASBOURNE BRANCH MILL PLAIN CROSSING BRANCH MALL 205 BRANCH CLACKAMAS BRANCH



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Unitus Community Credit Union |
|---------------------|-------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Brian Devereux (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>30</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [X_] is the <u>Vice President of Lending, Unitus Community CU</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Sianature)



DEPARTMENT OF JUSTICE

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Universal American Mortgage Company, LLC |
|---------------------|--|
| Jurisdiction* | Florida |

*if Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Virginia Casagrande (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>4</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>V.P. Controller</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and Is authorized by such entity to execute this affidavit on its behalf.

State of <u>Florida</u>)

County of <u>Pinellas</u>)

Signed and sworn to (or affirmed) before me this <u>3rd</u> day of <u>February</u>, <u>2017</u> by <u>Virginia Casagrande</u>



Marow Notary Public for My commission expires:

| D | EC | | $[] \bigvee [$ | M |
|--------------------------|-----|-----|----------------|---|
| $\left[\bigcap \right]$ | JAN | 26. | 2017 | U |

DEPARTMENT OF JUSTICE PORTLAND LEGAL OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | USAA Federal Saving Bank |
|---------------------|--------------------------|
| Jurisdiction* | San Antonio,TX |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Ricardo N. Garcia (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

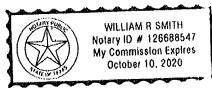
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>5</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [X] Is the Default Servicing Manager [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Recardo Jone

(Signature) Ricardo N. Garcia , Default Servicing Manager

State of Texas) <u>)</u> SS.

County of <u>BoxAn</u>) Signed and sworn to (or affirmed) before me this <u>25</u> day of <u>Auruary</u>, <u>2017</u> by <u>hicardo</u> <u>Gaucin</u>



Notary Public for <u>USAA</u> My commission expires: <u>10-10-2020</u>

USAgencies Credit Union Attn: James Lumpkin 95 SW Tayor St. Portland, OR 97204



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | USAgencies Credit Union |
|---------------------|-------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, James Lumpkin (printed name) being first duly sworn, depose, and state that;

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>President/CEO</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Signature

County of <u>Multnomah</u>)

ames

) ss.

OFFICIAL STAMP

KATHLEEN K FAMA NOTARY PUBLIC-OREGON COMMISSION NO. 949921 MY COMMISSION EXPIRES MAY 08, 2020

State of Oregon

Signed and sworn to (or affirmed) before me this <u>12th</u> day of <u>June</u>, <u>2017</u>

la fuleen Notary Public for State of My commission expires:

AFTER RECORDING, RETURN TO: Erich M. Paetsch, OSB# 993350 Saalfeld Griggs PC P. O. Box 470 Salem, Oregon 97308-0470 Telephone: (503) 399-1070



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| LENDER/BENEFICIARY: | VALLEY CREDIT UNION | |
|---------------------|-------------------------------------|--|
| JURISDICTION: | OREGON STATE CHARTERED CREDIT UNION | |

I, Terri Lucas, Lending Manager for Valley Credit Union, being first duly sworn, depose, and state that: This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under ORS 86.726(1)(b).

1. The above named entity, Valley Credit Union, commenced or caused an affiliate or agent to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: Zero (O);

2. The undersigned further certifies that she is the Lending Manager for Valley Credit Union, the entity claiming exemption from requirements established under ORS 86.726(1)(b), and is authorized by such entity to execute this affidavit on its behalf.

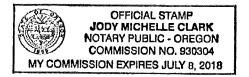
DATED this \underline{B} day of April, 2017.

ncas

Valley Credit Union By: Terri Lucas Its: Lending Manager

STATE OF OREGON, County of Marion) ss.

SUBSCRIBED AND SWORN before me on the $\cancel{12}$ day of April, 2017 on behalf of Terri Lucas, Valley Credit Union, Lending Manager.



te of Oregon

EXEMPTION AFFIDAVIT (2017)

Lacee Campbeli Vanderblit Mortgage and Finance, inc. PO Box 9800 Maryville, TN 37802



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Vanderbilt Mortgage and Finance, Inc. |
|---------------------|---------------------------------------|
| Jurisdiction* | Tennessee |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. Antonetta Miller (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attomey General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>9______</u>[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>Default Servicing Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is/authorized by such entity to execute this affidavit on its behalf.

State of envesse County of BOM Signed and sworn to (or affirmed) before me this day of Antonetta Aller bγ Notary Public for Tennessee NIN DISTIN My commission expires OF ENNESSEE

Verity Credit Union Attention: Sarah Slonsky 11027 Meridian Ave N, Suite 102 Seattle, WA 98133



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Verity Credit Union |
|---------------------|---------------------|
| Jurisdiction* | Washington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Sarah Slonsky (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]

[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [___] is the <u>Chief Lending Officer</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) State of WA) ss. County of King 2017 Signed and sworn to (or affirmed) before me this 3rd ____ day of January by Sarah Slonsky Notary Public for 114 NAN S. AURICCHIO My commission expires: NOTARY PUBLIC STATE OF WASHINGTON **COMMISSION EXPIRES** SEPTEMBER 19, 2017

Wallick & Volk, Inc. Attn: Mavis Erickson 222 E 18th Street Cheyenne, WY 82001



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Wallick and Volk |
|---------------------|------------------|
| Jurisdiction* | Wyoming |

*If Lender/Beneficlary Is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Steven G. Carver (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: __________ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>CFO/Senior Vice President</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

 State of Wyoming)
) ss.

 County of Laramie)
)

 Signed and sworn to (or affirmed) before me this <u>31st</u> day of <u>January</u>, <u>2017</u>

 by <u>Steven G. Carver</u>

JANEL D. BEATTY NOTARY PUBLIC COUNTY OF STATE OF LARAMIE AY COMMISSION

Notary Public for My commission expires:

Hershner Hunter LLP PO Box 1475 Eugene, OR 97440



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Washington Federai |
|---------------------|--------------------|
| Jurisdiction* | USA |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

, Ronald R. Miller (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 7. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 17 Inot to exceed 1751.
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [✓] is the Vice President & Collection Mar. *[insert title]* of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of Washington)

OF WASHING WAST WAST

) SS. County of King Signed and sworn to (or affirmed) before me this 20th ____ day of _____ January 2017 by <u>Ronald R. Miller, Vice President & Collection Mgr. for Washington Federal</u> *Uaure Miller, Vice President & Collection Mgr. for Washington Federal Uaure Miller, Miller* My commission expires: 01-15-2019

JODY M. MCCORMICK WASHINGTON TRUST BANK PO BOX 2127 SPOKANE, WA 99210



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | WASHINGTON TRUST BANK |
|---------------------|-----------------------|
| Jurisdiction* | WASHINGTON |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, JODY M. MCCORMICK (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[√] is the <u>CORPORATE COUNSEL</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

Siánature) State of Washington)) ss. County of Spokane) Signed and sworn to (or affirmed) before me this 12 day of JANUARY 2017 by JODY M. MCCORMICK Notary Public for WASHINGTON My commission expires: 9-8-2020

John D. Albert Sherman Sherman Johnnie & Hoyt, LLP PO Box 2247 Salem, OR 97308



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Wauna Credit Union (formerly Wauna Federal Credit Union) |
|---------------------|--|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

i, Randal W. Buholts (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

 The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0</u> [not to exceed 175];

2. The undersigned further certifies that she/he: [check only one of the following boxes]
[___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
[✓] is the Loss Mitigation Director
[insert title] of the entity claiming
exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

and W Beholt

State of <u>Oregon</u>)) ss.

County of MARION)

Signed and sworn to (or affirmed) before me this <u>9+5</u> day of <u>January</u>, <u>2017</u> by <u>Randal W. Buholts, Loss Mitigation Director for Wauna Credit Union</u>.

May Both Jarrans?



Notary Public for <u>Oregon</u> My commission expires: <u>6-6-17</u>

Webster Bank Colleen Menzies AVP Foreclosure Manager 200 Executive Boulevard Southington, CT 06489 Mailstop S0-200

ECEIV

CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Webster Bank | | |
|---------------------|--------------|--|---|
| Jurisdiction* | Connecticut | | · |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Colleen Menzies</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>1</u>______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [___] is the <u>AVP Foreclosure Manager</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

State of <u>Connecticut</u>)) ss. County of Hartford) Signed and sworn to (or affirmed) before me this bv Notary Public for LORI A. DALLING My commission NOTARY PUBLIC STATE OF CONNECTICUT MY COMM. EXP. 08-31-20



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | WEI Mortgage LLC |
|---------------------|------------------|
| Jurisdiction* | Maryland |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I. David Lavkin (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: 0 (2cro) [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [___] Is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [√] is the <u>EVP and General Counsel</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature) David Larkin, EVP/ General Coursel

| State of <u>New Jersey</u> | |
|--|--------------------------|
|) ss. | |
| County of Burlington | ORICI |
| Signed and sworn to (or affirmed) before me this 28th day of | _, <u></u> , |
| by David Larkin David Condant | • |
| tense concery | Tais at |
| Notary Public for State of New | Jerzen |
| My commission expires: <u>6.11.17</u> | |
| DENISE ELAINE CONLEY Commission # 2421797 Notary Public, State of New Jersey My Commission Expires June 11, 2017 | LINE Fyrm 300 V7/5/13 |

Willamette Falls Holdings, LLC 1980 Willamette Falls Drive Sulta 200 West Linn, OR 97068



DEPARTMENT OF JUSTICE PORTLAND LEGAL

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Willamette Falls Holdings, LLC |
|---------------------|--------------------------------|
| Jurisdiction* | Oregon |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Mark Handris (printed name) being first duiy sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>o</u>_______[not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [√] is the <u>Managing Member</u> [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of OKCOP

) ss.

County of Cluckamas) Signed and sworn to (or affirmed) before me this <u>27</u> day of <u>January</u> <u>2017</u> by <u>ShuckEngen Huck</u>



| Notary Public for OVEDON | |
|------------------------------|---------|
| My commission expires: March | 19,2010 |
| | |

Willamette Valley Bank Attn: Michelle Pack PO Box 2747 Salem, OR 97301

DEPARTMENT OF JUSTICE PORTLAND LEGAL

JAN 24 2017

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Willamette Valley Bank | - |
|---------------------|------------------------|---|
| Jurisdiction* | Oregon | |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

(printed name) being first duly sworn, depose, and state that: I, Craig Hummel

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- 1. The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: _____ [not to exceed 175];
- 2. The undersigned further certifies that she/he: [check only one of the following boxes] [____] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or [✓] is the EVP, Chief Credit Officer _ [insert title] of the entity claiming exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf.

(Signature)

State of SS.

bγ

County of Signed and sworp to (or affirmed) before me this 24th $P \neq CCO$ imino Notary Public for

My commission expires:

OFFICIAL STAMP BUNNY M TUCKER NOTARY PUBLIC - OREGON COMMISSION NO. 946073 MY COMMISSION EXPIRES JANUARY 13, 2020

Yakima Federal Savings & Loan Attn: Colton Meek, Senior Vice President 118 E Yakima Avenue Yakima, WA 98901



CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| Lender/Beneficiary: | Yakima Federal Savings and Loan Association |
|---------------------|---|
| Jurisdiction* | Washington |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, <u>Colton R. Meek</u> (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

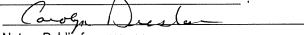
- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>None</u> [not to exceed 175];
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304, or
 [_√] is the <u>Senior Vice President</u> [insert title] of the entity claiming
 exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity
 to execute this affidavit on its behalf.

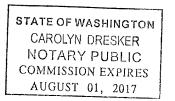
In nurely

(Signature)

State of <u>Washington</u>)

County of <u>Yakima</u>) Signed and sworn to (or affirmed) before me this <u>4th</u> day of <u>January</u>, <u>2017</u> by <u>Colton R. Meek</u>





) ss.

Notary Public for <u>Washington</u> My commission expires: <u>August 1, 2017</u>

Wendy E Smith Zions Bancorporation 2460 South 3270 West West Valley City UT 84119

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CIVIL ENFORCEMENT DIVISION

OREGON FORECLOSURE AVOIDANCE PROGRAM BENEFICIARY EXEMPTION AFFIDAVIT

| | Lender/Beneficiary: | ZB, National Association |
|--------------------------------------|---------------------|--|
| Jurisdiction* Department of the Trea | | Department of the Treasury, United States of America |

*If Lender/Beneficiary is not a natural person, provide the state or other jurisdiction in which the Lender/Beneficiary is organized.

I, Lawrence R. Dingivan (printed name) being first duly sworn, depose, and state that:

This affidavit is submitted for a claim of exemption to the Office of the Attorney General of Oregon under Oregon Laws 2013, chapter 304, §2(1)(b).

- The above named individual or entity commenced or caused an affiliate or agent of the individual or entity to commence the following number of actions to foreclose a residential trust deed by advertisement and sale under ORS 86.752 or by suit under ORS 88.010 during the calendar year preceding the date of this affidavit: <u>0 [not to exceed 175];</u>
- The undersigned further certifies that she/he: [check only one of the following boxes]
 [___] is the individual claiming exemption from requirements established under Or Laws 2013, ch 304. or

[insert title] of the entity claiming [🖌] is the Vice President exemption from requirements established under Or Laws 2013, ch 304, and is authorized by such entity to execute this affidavit on its behalf. (Signature) State of Utah) ss. County of Salt Lake) Signed and sworn to (or affirmed) before me this $\underline{17}^{++}$ day of January 2017 by Lawrence R. Dingivan

Notary Public for My commission expires: 3

