

## NOTICE: NO CERTIFICATE OF COMPLIANCE WILL BE ISSUED STATE OF OREGON FORECLOSURE AVOIDANCE PROGRAM

Grantor:			
Beneficiary:			
Property Address:			
Instrument / Recordin	g No.		
Date / County			
Case Number			
Did not appresson or be authority to avoidance reparticipation beneficiary  Did not sub Provider:  Did not sign beneficiary	s follows:  bear in person or by remoty remote audio or video onegotiate on the benefic measure or, if the benefic n by remote communicar's behalf and commit the semit the following mater and grantor agreed, if an adocument that sets for and grantor agreed, if an adocument agreed, if an adocum	ote audio or video concommunication to, the ciary's behalf and conciary or agent did not tion of a person with the beneficiary to a foreals required under Out of the terms of any tay; or	agent did not comply with ORS 86.726,  mmunication, or did not send an agent in ne resolution conference with complete mmit the beneficiary to a foreclosure have complete authority, did not provide the complete authority to negotiate on the eclosure avoidance measure;  RS 86.729(4) to the service  foreclosure avoidance measure to which the
2. On this date I mailed General electronical		ne beneficiary and pro	ovided a copy to the grantor and the Attorney
	(Signature)		
	(Printed name)		Date

Form 670a 1