After Recording Return To: QFUND FINCL, INC. DBA QUALFUND LENDING 110 110TH AVE NE, STE#520 BELLEVUE, WA 98004



REFERENCE #: 998722545
ASSIGNEE FLAGSTAR BANK, FSB

LAND TITLE COMPANY OF SKAGET COUNTY

ASSIGNOR OFUND FINCL, INC. DBA QUALFUND LENDING, AN OREGON CORPORATION

TA-101109

## ASSIGNMENT OF DEED OF TRUST

LOAN #: 38803

For Value Received, the undersigned holder of a Deed of Trust (herein "Assignor") whose address is 110 110TH AVE NE, STE#520, BELLEVUE, WA 98004

does hereby grant, sell, assign, transfer and convey, unto FLAGSTAR BANK, FSB

existing under the laws of THE STATE OF MICHIGAN (herein "Assignee"), whose address is 5151 CORPORATE DRIVE, TROY, MI 48098

all beneficial interest under a certain Deed of Trust, dated MAY 6, 2002 executed by JOHN A. DEVINE AND JO E. DEVINE, HUSBAND AND WIFE

, made and

to	LAND	TITLE	COMPANY
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Trustee

and given to secure payment of

\$128,000.00 which Deed of Trust is of record in Book, Volume, or

(Original Amount of Principal)

Liber No. of the

, at page

(or as No. 200205200184

Records of SKAGIT

State of WASHINGTON , together with the note(s) and obligations therein described, the money due and to become due thereon with interest, and all rights accrued or to accrue under such Deed of Trust.

TO HAVE AND TO HOLD, the same unto Assignee, its successor and assigns, forever, subject only to the terms and conditions of the above-described Deed of Trust.

IN WITNESS WHEREOF, the undersigned Assignor has executed this Assignment of Deed of Trust on

5-17-02

QFUND FINCL, INC. DBA QUALFUND LENDING, AN OREGON CORPORATION

Attest ---V.P. OF **OPERATIONS** State of Washington County of KING I certify that I know or have satisfactory evidence that PHILLIP ROSS is the person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute the instrument and acknowledged it as the V.P. OF OPERATIONS of OFUND FINANCIAL, QUALFUND LENDING to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument Dated: (Signature) LUCINDA OSBORN FUNDING MANAGER (Title) 07-29-02 My appointment expires \_

WAGVAS (L0298.1)

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