

# Public Notices

continued from previous page

Assignee of Mortgage  
Wilford & Geske  
Attorneys for Assignee of  
Mortgage  
Lawrence A. Wilford  
James A. Geske  
7650 Currell Boulevard  
Suite 300  
Woodbury, Minnesota 55125  
(651)209-3300  
File ID: 128100-28665  
(Published in the Savage Pacer on  
Saturday, October 4, 11, 18, 25 and  
November 1, 8, 2008; No. 2959)

**NOTICE OF MORTGAGE  
FORECLOSURE SALE**  
NOTICE IS HEREBY GIVEN  
that default has occurred in the  
conditions of the following described  
mortgage:

**DATE OF MORTGAGE:**  
December 29, 2006  
**ORIGINAL PRINCIPAL  
AMOUNT OF MORTGAGE:**  
\$239,400.00

**MORTGAGOR(S):** Craig M Volk  
and Nicole L. Volk, Husband and  
Wife

**MORTGAGEE:** Mortgage  
Electronic Registration Systems,  
Inc.

**DATE AND PLACE OF  
RECORDING:** Recorded: January  
30, 2007 Scott County Recorder

**Document #:** A 763443  
**Transaction Agent:** Mortgage  
Electronic Registration Systems, Inc  
**Transaction Agent Mortgage  
Identification Number:**  
100013300914697004

**Lender or Broker:** GreenPoint  
Mortgage Funding, Inc.

**Residential Mortgage Servicer:**  
Aurora Loan Services, LLC  
**Mortgage Originator:** Not  
Applicable

**LEGAL DESCRIPTION OF  
PROPERTY:** Lot 35, Block 1,  
Featherstone Village, CIC No. 1167,  
Scott County, Minnesota.

**COUNTY IN WHICH  
PROPERTY IS LOCATED:** Scott

**Property Address:**  
6934 S Park Dr  
Savage, MN 55378

**Tax Parcel ID No:** 263780350  
**AMOUNT DUE AND CLAIMED  
TO BE DUE AS OF DATE OF  
NOTICE:** \$260,587.03

THAT all pre-foreclosure  
requirements have been complied  
with; that no action or proceeding  
has been instituted at law or  
otherwise to recover the debt secured  
by said mortgage, or any part  
thereof.

PURSUANT to the power of sale  
contained in said mortgage, the  
above described property will be  
sold by the Sheriff of said county as  
follows:

**DATE AND TIME OF SALE:**  
November 20, 2008 10:00 A.M.

**PLACE OF SALE:** Sheriff's  
Office Civil Unit

301 South Fuller St.  
Shakopee, MN

to pay the debt secured by said  
mortgage and taxes, if any, on said  
premises and the costs and  
disbursements, including attorneys  
fees allowed by law, subject to  
redemption within 6 months from  
the date of said sale by the  
mortgagor(s), their personal  
representatives or assigns.

Mortgagor(s) released from  
financial obligation: NONE

THIS COMMUNICATION IS  
FROM A DEBT COLLECTOR  
ATTEMPTING TO COLLECT A  
DEBT. ANY INFORMATION  
OBTAINED WILL BE USED FOR  
THAT PURPOSE.

THE RIGHT TO  
VERIFICATION OF THE DEBT AND  
IDENTITY OF THE ORIGINAL  
CREDITOR WITHIN THE TIME  
PROVIDED BY LAW IS NOT  
AFFECTED BY THIS ACTION.

THE TIME ALLOWED BY LAW  
FOR REDEMPTION BY THE  
MORTGAGOR, THE  
MORTGAGOR'S PERSONAL  
REPRESENTATIVES OR ASSIGNS,  
MAY BE REDUCED TO FIVE  
WEEKS IF A JUDICIAL ORDER IS  
ENTERED UNDER MINNESOTA  
STATUTES, SECTION 582.032,  
DETERMINING, AMONG OTHER  
THINGS, THAT THE MORTGAGED  
PREMISES ARE IMPROVED WITH  
A RESIDENTIAL DWELLING OF  
LESS THAN FIVE UNITS, ARE NOT  
PROPERTY USED IN  
AGRICULTURAL PRODUCTION,  
AND ARE ABANDONED.

**Dated:** October 4, 2008  
Mortgage Electronic Registration  
Systems, Inc.  
Mortgagee

Wilford & Geske  
Attorneys for Mortgagee  
Lawrence A. Wilford  
James A. Geske  
7650 Currell Boulevard  
Suite 300  
Woodbury, Minnesota 55125  
(651)209-3300  
File ID: 014425-34974

(Published in the Savage Pacer on  
Saturday, October 4, 11, 18, 25 and  
November 1, 8, 2008; No. 2960)

**NOTICE OF MORTGAGE  
FORECLOSURE SALE**  
NOTICE IS HEREBY GIVEN

that default has occurred in the  
conditions of the following described  
mortgage:

**DATE OF MORTGAGE:**  
November 29, 2005  
**ORIGINAL PRINCIPAL  
AMOUNT OF MORTGAGE:**  
\$231,800.00

**MORTGAGOR(S):** Charles  
SchAAF and Beth SchAAF, Husband  
and Wife

**MORTGAGEE:** Mortgage  
Electronic Registration Systems,  
Inc.

**DATE AND PLACE OF  
RECORDING:** Recorded: December  
6, 2005 Scott County Recorder

**Document #:** A722708  
**Transaction Agent:** Mortgage  
Electronic Registration Systems, Inc  
**Transaction Agent Mortgage  
Identification Number:**  
100015700061795932

**Lender or Broker:** Countrywide  
Home Loans, Inc.

**Residential Mortgage Servicer:**  
Countrywide Home Loans, Inc

**Mortgage Originator:** Not  
Applicable

**LEGAL DESCRIPTION OF  
PROPERTY:** Lot 1, Block 3, Orchard  
Park 3rd Addition, Scott County,  
Minnesota

**COUNTY IN WHICH  
PROPERTY IS LOCATED:** Scott

**Property Address:**  
475 Orchard Pkwy S. Shakopee,  
MN 55379

**Tax Parcel ID No:** 27-2200180  
**AMOUNT DUE AND CLAIMED  
TO BE DUE AS OF DATE OF  
NOTICE:** \$235,097.90

THAT all pre-foreclosure  
requirements have been complied  
with; that no action or proceeding  
has been instituted at law or  
otherwise to recover the debt secured  
by said mortgage, or any part  
thereof.

PURSUANT to the power of sale  
contained in said mortgage, the  
above described property will be

sold by the Sheriff of said county as  
follows:

**DATE AND TIME OF SALE:**  
November 20, 2008 10:00 A.M.

**PLACE OF SALE:** Sheriff's  
Office Civil Unit

301 South Fuller St.  
Shakopee, MN

to pay the debt secured by said  
mortgage and taxes, if any, on said  
premises and the costs and  
disbursements, including attorneys  
fees allowed by law, subject to  
redemption within 6 months from  
the date of said sale by the  
mortgagor(s), their personal  
representatives or assigns.

Mortgagor(s) released from  
financial obligation: NONE

THIS COMMUNICATION IS  
FROM A DEBT COLLECTOR  
ATTEMPTING TO COLLECT A  
DEBT. ANY INFORMATION  
OBTAINED WILL BE USED FOR  
THAT PURPOSE.

THE RIGHT TO  
VERIFICATION OF THE DEBT AND  
IDENTITY OF THE ORIGINAL  
CREDITOR WITHIN THE TIME  
PROVIDED BY LAW IS NOT  
AFFECTED BY THIS ACTION.

THE TIME ALLOWED BY LAW  
FOR REDEMPTION BY THE  
MORTGAGOR, THE  
MORTGAGOR'S PERSONAL  
REPRESENTATIVES OR ASSIGNS,  
MAY BE REDUCED TO FIVE  
WEEKS IF A JUDICIAL ORDER IS  
ENTERED UNDER MINNESOTA  
STATUTES, SECTION 582.032,  
DETERMINING, AMONG OTHER  
THINGS, THAT THE MORTGAGED  
PREMISES ARE IMPROVED WITH  
A RESIDENTIAL DWELLING OF  
LESS THAN FIVE UNITS, ARE NOT  
PROPERTY USED IN  
AGRICULTURAL PRODUCTION,  
AND ARE ABANDONED.

**Dated:** October 4, 2008  
Mortgage Electronic Registration  
Systems, Inc.  
Mortgagee

Wilford & Geske  
Attorneys for Mortgagee  
Lawrence A. Wilford  
James A. Geske  
7650 Currell Boulevard  
Suite 300  
Woodbury, Minnesota 55125  
(651)209-3300  
File ID: 054975-35164

(Published in the Savage Pacer on  
Saturday, October 4, 11, 18, 25 and  
November 1, 8, 2008; No. 2961)

**NOTICE OF MORTGAGE  
FORECLOSURE SALE**  
NOTICE IS HEREBY GIVEN

that default has occurred in the  
conditions of the following described  
mortgage:

**DATE OF MORTGAGE:**  
September 8, 2006  
**ORIGINAL PRINCIPAL  
AMOUNT OF MORTGAGE:**  
\$11,437.00

**MORTGAGOR(S):** Jeffrey M.  
Muelken, Single Person

**MORTGAGEE:** Mortgage  
Electronic Registration Systems,  
Inc.

**DATE AND PLACE OF  
RECORDING:** Recorded: November  
7, 2006 Scott County Recorder

**Document #:** A756145  
**ASSIGNMENTS OF  
MORTGAGE:** And thereafter  
assigned to: Bank of America, N.A.  
**Dated:** June 16, 2008  
**Transaction Agent:** Mortgage  
Electronic Registration Systems, Inc  
**Transaction Agent Mortgage  
Identification Number:**  
100062604706453819

**Lender or Broker:**

HomeComings Financial Network,  
Inc.

**Residential Mortgage Servicer:**  
Bank of America-Greensboro NC

**Mortgage Originator:** Not  
Applicable

**LEGAL DESCRIPTION OF  
PROPERTY:** That part of Lot 8,  
Block 1, Woodview 2nd Addition,  
Scott County, Minnesota, lying  
Northeasterly of the following  
described line:

Beginning at a point on the  
Southeasterly line of said Lot 8,  
distant 37.50 feet Northeasterly of  
the most Southerly corner of said  
Lot 8, thence Northwesterly to a  
point on the Northwesterly line of  
said Lot 8, distant 37.50 feet  
Northeasterly of the most Westerly  
corner of said Lot 8 and there  
terminating.

**COUNTY IN WHICH  
PROPERTY IS LOCATED:** Scott

**Property Address:**  
17472 Sunray Circle Sw  
Prior Lake, MN 55372  
**Tax Parcel ID No:** R252270080  
**AMOUNT DUE AND CLAIMED  
TO BE DUE AS OF DATE OF  
NOTICE:** \$13,652.02

THAT all pre-foreclosure  
requirements have been complied  
with; that no action or proceeding  
has been instituted at law or  
otherwise to recover the debt secured  
by said mortgage, or any part  
thereof.

PURSUANT to the power of sale  
contained in said mortgage, the  
above described property will be  
sold by the Sheriff of said county as  
follows:

**DATE AND TIME OF SALE:**  
September 25, 2008 10:00 A.M.

**PLACE OF SALE:** Sheriff's  
Office Civil Unit

301 South Fuller St.  
Shakopee, MN

to pay the debt secured by said  
mortgage and taxes, if any, on said  
premises and the costs and  
disbursements, including attorneys  
fees allowed by law, subject to  
redemption within 6 months from  
the date of said sale by the  
mortgagor(s), their personal  
representatives or assigns.

Mortgagor(s) released from  
financial obligation: NONE

THIS COMMUNICATION IS  
FROM A DEBT COLLECTOR  
ATTEMPTING TO COLLECT A  
DEBT. ANY INFORMATION  
OBTAINED WILL BE USED FOR  
THAT PURPOSE.

THE RIGHT TO  
VERIFICATION OF THE DEBT AND  
IDENTITY OF THE ORIGINAL  
CREDITOR WITHIN THE TIME  
PROVIDED BY LAW IS NOT  
AFFECTED BY THIS ACTION.

THE TIME ALLOWED BY LAW  
FOR REDEMPTION BY THE  
MORTGAGOR, THE  
MORTGAGOR'S PERSONAL  
REPRESENTATIVES OR ASSIGNS,  
MAY BE REDUCED TO FIVE  
WEEKS IF A JUDICIAL ORDER IS  
ENTERED UNDER MINNESOTA  
STATUTES, SECTION 582.032,  
DETERMINING, AMONG OTHER  
THINGS, THAT THE MORTGAGED  
PREMISES ARE IMPROVED WITH  
A RESIDENTIAL DWELLING OF  
LESS THAN FIVE UNITS, ARE NOT  
PROPERTY USED IN  
AGRICULTURAL PRODUCTION,  
AND ARE ABANDONED.

**Dated:** August 9, 2008  
Bank of America, N.A.  
Assignee of Mortgagee  
Wilford & Geske  
Attorneys for Assignee of  
Mortgagee

Lawrence A. Wilford  
James A. Geske  
7650 Currell Boulevard  
Suite 300  
Woodbury, Minnesota 55125  
(651)209-3300  
File ID: 016843-31000

(Published in the Savage Pacer on  
Saturday, August 9, 16, 23, 30 and  
September 6, 13, 2008; No. 2876)

**NOTICE OF POSTPONEMENT  
OF MORTGAGE FORECLOSURE  
SALE**

The above referenced sale  
scheduled for September 25, 2008 at  
10:00 a.m. has been postponed to  
October 9, 2008 at 10:00 a.m. in the  
Sheriff's Office, Civil Unit, 301 South  
Fuller St., Shakopee, MN, in said  
County and State.  
**Dated:** October 4, 2008  
Bank of America, N.A.  
Assignee of  
Mortgagee

Wilford & Geske, PA  
Attorneys for Assignee of  
Mortgagee  
Lawrence A. Wilford  
James A. Geske  
7650 Currell Blvd., Suite 300  
Woodbury, MN 55125  
(651)209-3300  
Client ID: 31000  
(Published in the Savage Pacer on  
Saturday, October 4, 2008; No. 2962)

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with  
exclusive rights to that name. The  
filing is required as a consumer  
protection, in order to enable  
consumers to be able to identify the  
true owner of a business.

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

exclusive rights to that name. The  
filing is required as a consumer  
protection, in order to enable  
consumers to be able to identify the  
true owner of a business.

1. State the exact assumed name  
under which the business is or will  
be conducted: TQG

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with  
exclusive rights to that name. The  
filing is required as a consumer  
protection, in order to enable  
consumers to be able to identify the  
true owner of a business.

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with

1. State the exact assumed name  
under which the business is or will  
be conducted: The Quotidian Group

2. State the address of the  
principal place of business. A  
complete street address or rural  
route and rural route box number is  
required; the address cannot be a  
P.O. Box. 5225 River Oak Drive,  
Savage, MN 55378

3. List the name and complete  
address of all persons conducting  
business under the above Assumed  
Name or if the business owner is a  
corporation, provide the legal  
corporate name and registered  
office address of the corporation:  
Ficken Consulting, LLC, 5225 River  
Oak Drive, Savage, MN 55378

4. I certify that I am authorized  
to sign this certificate and I further  
certify that I understand that by  
signing this certificate, I am subject  
to the penalties of perjury as set  
forth in Minnesota Statutes section  
609.48 as if I had signed this  
certificate under oath.

Signature: John Kicken  
CEO  
612-618-9835

STATE OF MINNESOTA  
SECRETARY OF STATE  
CERTIFICATE OF  
ASSUMED NAME

Minnesota Statutes Chapter 333  
File Number:  
Date Filed: September 12, 2008

The filing of an assumed name  
does not provide a user with