

ARC: 041046003

AFFIDAVIT

ESCROW NUMBER: 10-2934-97

The undersigned, in order to induce Chicago Title Insurance Company, an Oregon Corporation, to issue a Title Insurance Policy, hereby states as follows:

- 1) That I (we) are not and have not been a resident in a skilled nursing facility, residential care facility, or adult foster home, since September 9, 1995.
- 2) That I (we) are not the grantees of the subject premises from a family member who is or was a resident in a skilled nursing facility, residential care facility, or adult foster home.
- 3) That I (we), as trustees, do not hold legal title of the subject premises which benefits an individual who established such trust and is or was a resident in a skilled nursing facility, residential care facility, or adult foster home.

OR

- 1) That I (we) have received care from a licensed skilled nursing facility, residential care facility or a foster care home, from:

 (list name and location of care facility)

Any and all extended care received from any source has been fully paid or we hereby instruct escrow to pay, in full, the sum of \$ _____, to: _____.

No extended care lien will arise against this real property.

DATE: 3-26-97

Scott B. Ankeny
 SCOTT B. ANKENY

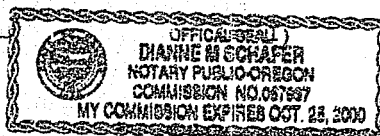
State of Oregon

County of Lane3-26, 1997

Personally appeared the above named SCOTT B. ANKENY, and acknowledged the foregoing instrument to be his/her/their voluntary act and deed.

WITNESS My hand and official seal.

[Signature]
 Notary Public for Oregon
 My Commission Expires: _____



STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Aspen Title & Escrow the 27th day
 of March A.D., 19 97 at 3:45 o'clock P. M., and duly recorded in Vol. M97
 of Deeds on Page 9054.

FEE \$10.00

Bernetha G. Letsch, County Clerk
 by Ruthann Ross