

2007-016642

Klamath County, Oregon



00031878200700166420010018

09/21/2007 09:24:24 AM

Fee: \$21.00

Requester: State of Oregon,
Department of Human Services

Recipient: Melvin D. Morgan

After recording,
return to:

Estate Administration Unit
Attn: Tammy Bersin
Oregon Department
of Human Services
P.O. Box 14021
Salem, OR 97309-5024

REQUEST FOR NOTICE OF TRANSFER OR ENCUMBRANCE

1. This Request for Notice pertains to the following recipient of public assistance, as defined in ORS 411.010:

Recipient's Name: Melvin D. Morgan
Recipient's DHS Identifier: AD300K40

2. This Request for Notice pertains to transfer or encumbrance of the following described real property:

A tract of land situated in the NE 1/4 SW 1/4 (Lot 6) of section 34, township 34 south, range 7 east of the Willamette Meridian, more particularly described as follows: Beginning at the intersection of the northwesterly line of LaLakes Ave with northeasterly line of Schonchin Street in West Chiloquin; thence northeasterly along the northwesterly line of LaLakes avenue a distance of 50 feet to a point; thence northwesterly at right angles to LaLakes Avenue a distance of 116.3 feet to a point; thence southwesterly parallel with LaLakes avenue a distance of 50 feet to a point; thence southeasterly at right angles to LaLakes Avenue a distance of 116.3 feet to the point of beginning, said parcel also described as lot 55 of R.C. Spinks addition to Chiloquin, an unplatted subdivision.

3. Pursuant to Oregon Revised Statutes 93.268, 205.246 and 411.692, the Oregon Department of Human Services requests that notice of transfer or encumbrance of the above described real property, using DHS Model Form Notice of Transfer or Encumbrance or a substantially similar form, be mailed to the following address:

Estate Administration Unit
Attn: Tammy Bersin
Oregon Dept. of Human Services
P.O. Box 14021
Salem, OR 97309-5024
Phone: (800)826-5675

Executed this 18th Day of Sept., 20 07

OREGON DEPT. OF HUMAN SERVICES (ESTATE ADMINISTRATION UNIT)

By: [Signature]
Name: Tammy Bersin

Title: Assistant Estate Administrator

STATE OF OREGON, County of Marion

The foregoing was acknowledge before me this 18th day of Sept., 20 07
by [name:] Tammy Bersin as [title] Assistant Estate Administrator of the Estate
Administration Unit of the Oregon Department of Human Services on its behalf.

Notary Public for Oregon
My commission expires: 9/12/2010

