2009-015395

Klamath County, Oregon



12/07/2009 09:51:39 AM

Fee: \$37.00

Requester: State of Oregon, Department of Human Services

Recipient: Betty L. Rimer

After recording,

return to:

. . **.** •

Estate Administration Unit Attn: <u>Tammy Bersin</u> 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: Recipient's DHS Identifier: Betty L. Rimer DO700X1R

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

The west 11 feet of lot 43 and the east 34 feet of lot 44, and the east 34 feet of lot 59, and the vacated alley adjacent thereto, in Roselawn, a subdivision of block 70, Buena Vista addition to the City of Klamath Falls, Oregon, in the County of Klamath, State of Oregon.

 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: <u>Tammy Bersin</u> Oregon Dept. of Human Services	Phone: (800)826-5675
P.O. Box 14021 Salem, OR 97309-5024	
Executed this _20th _ Day of _November	, 20 <u>09 </u> .
OREGON DEPT. OF HUMAN SERVICES (ESTATE A	DMINISTRATION UNIT)
By://	
Name Taining Bersin	
Title: Estate Administrator	
STATE OF OREGON, County of <u>Marion</u> The foregoing was acknowledge before me this	: 3 20th day of Nov. , 20 09
	as [title] Estate Administrator of the Estate
Administration Unit of the Oregon Department of Huma	an Services on its behalf.
Delna Whith	·
Notary Public for Oregon	h
My commission expires: $-\frac{1}{2} \left(\frac{1}{2} \frac{1}{2} $	

