Requester: State of Oregon, Department of Human Services 00077262200900161780010018 Recipient: Lonnie B. Shields 12/29/2009 10:16:33 AM Fee: \$21.00 After recording, return to: **Estate Administration Unit** Attn: KRR Oregon Department Spouse of Human Services P.O. Box 14021 Salem. OR 97309-5024 REQUEST FOR NOTICE OF TRANSFER OR ENCUMBRANCE This Request for Notice pertains to the following recipient of public assistance, as defined in ORS 411.010: Lonnie B. Shields Recipient's Name: Recipient's DHS Identifier: YR800W2B This Request for Notice pertains to transfer or encumbrance of the following described real property: The North one-half of the Northwest Quarter of Section 10, Township 24 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon. Property ID #: R156468 Map & Tax Lot #: R-2410-00000-00900-000 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: Phone: (800)826-5675 Estate Administration Unit Attn: Kenneth R. Ryder Oregon Dept. of Human Services P.O. Box 14021 Salem, OR 97309-5024 Øay of December , 20 09 Executed this ÜMAM SERVICES (ESTATE ADMINISTRATION UNIT) OREGON By: Name: Kenneth R. Ryder Title: Estate Administrator STATE OF OREGON, County of Marion 21 The foregoing was acknowledge before me this day of Dec by [name:] Kenneth R. Ryder as [title] Estate Administrator of the Estate Adm/n/stration Unit of the/Oregon Department of Human Services on its behalf. Notary Public for Gregon OFFICIAL SEAL My commission expires: 06/04/2010 CINDY M STECKEL

2009-016178

Klamath County, Oregon

NOTARY PUBLIC-OREGON COMMISSION NO. 406799 MY COMMISSION EXPIRES JUNE 04, 2010