Requester: State of Oregon, Department of Human Services 00080662201000027960010010 Recipient: Gerldeen Milhorn Fee: \$37.00 03/02/2010 09:57:01 AM After recording, Estate Administration Unit return to: Cindy Steckel Attn: Oregon Department of Human Services Spouse 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: Gerldeen Milhorn Recipient's Name: Recipient's DHS Identifier: AB96052A This Request for Notice pertains to transfer or encumbrance of the following described real property: 2. Situs address; 2319 Oregon Ave., Klamath Falls, OR 97601. Map Tax Lot # R-3809-029BC-01400-000. Property description: Buena Vista Addition, Block 58, Lot 3 Less Por to Hwy. 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: Cindy Steckel Oregon Dept. of Human Services P.O. Box 14021 Salem, OR 97309-5024 . 20 10 Executed this 25th Day of Feb OREGON-DEPT. OF HUMAN SERVICES (ESTATE ADMINISTRATION UNIT) By: Cindy Steckel Name: Asst Estate Administrator Title: STATE OF OREGON, County of Marion , 20 The foregoing was acknowledge before me this 25th day of Feb of the Estate as [title] Asst Estate Administrator Cindy Steckel by [name:] Administration Unit of the Oregon Department of Human Services on its behalf. Notary Public for Oregon My commission expires: OFFICIAL SEAL NOTARY PUBLIC-OREGO COMMISSION NO. 42997

Klamath County, Oregon

COMMISSION EXPIRES JU