## 2013-002021 Klamath County, Oregon

NOTARY PUBLIC - OREGON COMMISSION NO. 463290 AY COMMISSION EXPIRES NOVEMBER 02, 2015

Requester: State of Oregon, Department of Human Services 00131810201300020210010012 Recipient: \_Jake & Helen Taylor 02/25/2013 08:58:46 AM Fee: \$37.00 2733 Front Malin OR 97632 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: -Jake-& Helen Taylor Recipient's Name: OK300R8E (Jake); FG300P1T Recipient's DHS Identifier: (Helen) This Request for Notice pertains to transfer or encumbrance of the following described real property: 2. A tract of land situated in the NE1/2SW1/4 of Sec. 15, Twp. 41 S., R. 12 East W.M., more particularly described as follows: Beginning at the Northwest corner of the S½N½N½NE¼SW¼ of Sec. 15 and being the true point of beginning; thence East parallel with the North line of the NE1/4SW1/4 198 feet; thence S. parallel with the West line of the NE¼SW¼ 165 feet; thence to the South line of S½N½N½NE¼SW¾, thence West parallel with the North line of NE1/4SW1/4 198 feet to the West line of NE1/4SW1/4; thence North along said West line 165 feet to the point of beginning, Klamath County, Oregon. Property ID #: R110187 Map & Tax Lot #: R-4112-015CA-00200-000 Situs Address: 2733 Front, Malin OR, 97632 Pursuant to Oregon Revised Statutes 93.268, 205.246 and 411.694, 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 , 20 13 Executed this 19 Day of February OREGON DEPT. OF HUMAN SERVICES (ESTATE ADMINISTRATION UNIT) By: Name: Deena Fitts Assistant Estate Administrator Title: STATE OF OREGON, County of Marion The foregoing was acknowledge before me this 19 day of Feb as [title] Assistant Estate Administrator of the Estate by [name:] Deena Fitts Administration Unit of the Oregon Department of Human Services on its behalf. OFFICIAL SEAL Notary Public for Oregon KAREN A ROTH My commission expires: