2013-011100 Klamath County, Oregon

| Requester: State of Oregon, Department of Human Services | | 00143085201300011000010015 | |
|--|---|---|-------------------|
| Recipient: | Mary A. Barnes | 00143086201300111000010015 10/01/2013 09:04:12 <u>AM</u> | Fee: \$37,00 |
| | | | |
| After recording, return to: | Estate Administration Unit | | |
| ☐ Spouse | Attn: <u>Kathleen E. Rossi</u> Oregon Department of Human Services P.O. Box 14021 Salem, OR 97309-5024 | | |
| | REQUEST FOR NOTIC | E OF TRANSFER OR ENCUMBRANCE | |
| 1. This Re | quest for Notice pertains to the following | recipient of public assistance, as defined in ORS 411.010: | |
| | cipient's Name: cipient's DHS Identifier: | Mary A. Barnes VA801D6X | |
| 2. This Re | quest for Notice pertains to transfer or er | ncumbrance of the following described real property: | |
| notice of tr | | 246 and 411.694, the Oregon Department of Human Servic cribed real property, using DHS Model Form Notice of Tra ailed to the following address: | |
| Att Ore P.C | tate Administration Unit n: Kathleen E. Rossi egon Dept. of Human Services D. Box 14021 lem, OR 97309-5024 | Phone: (800)826-5675 | |
| Executed : | this 23rd Day of September | , 20 <u>13</u> . | |
| OREGON By:(Name: Title: | PEPT OF HUMAN SERVICES (ESTAT (LL) Kathleen E. Rossi Assistant Estate Administrator | E ADMINISTRATION UNIT) | |
| The by [name:] | F OREGON, County of <u>Marion</u> e foregoing was acknowledge before me Kathleen E. Rossi ation Unit of the Oregon Department of He | as [title] Asst Estate Administrator | of the Estate |
| Notary Pu | blic for Oregon Separtment of All Supplies for Oregon (ssion expires: | OFFICIAL SEAL BETTY F HOLLAI NOTARY PUBLIC-ORE COMMISSION NO. 47 MY COMMISSION EXPIRES MAY | GON 8050 |