

2019-009348

Klamath County, Oregon



00245450201900093480010019

08/16/2019 10:12:54 AM

Fee: \$82.00

Requester: State of Oregon,
Department of Human Services

Recipient: Sheila Barbara Frieze

After recording,
return to:

Estate Administration Unit
Attn: Michael Willis
Oregon Department
of Human Services
P.O. Box 14021
Salem, OR 97309-5024

☐ Spouse

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: Sheila Barbara Frieze
Recipient's DHS Identifier / EAU #: OW701C7S / 450559

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

Subdivision: THE MEADOWS Block:14 Lots:2

Situs Address: 4310 Meadows Ct S Klamath Falls OR 97603 - 8068
Map and Taxlot: 3909-011CD-02000
Tax Account No.: 556375

3. 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:

Estate Administration Unit
Attn: Michael Willis
Oregon Dept. of Human Services
P.O. Box 14021
Salem, OR 97309-5024
Phone: (800)826-5675

Executed this 12 Day of August, 20 19

OREGON DEPT. OF HUMAN SERVICES (ESTATE ADMINISTRATION UNIT)

By: [Signature]
Name: Michael Willis
Title: Assistant Estate Administrator

STATE OF OREGON, County of Marion

The foregoing was acknowledged before me this 12 day of August, 20 19
by [name:] Michael Willis as [title] Assistant Estate Administrator of the Estate
Administration Unit of the Oregon Department of Human Services on its behalf.

Notary Public for Oregon
My commission expires: 4/18/2023

