

Requester: State of Oregon,
Department of Human Services



Recipient: Wells, Mildred E

06/07/2021 03:02:57 PM

Fee: \$82.00

After recording,
return to:

Estate Administration Unit
Attn: Veronica Sepulveda
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: Wells, Mildred E
Recipient's DHS Identifier / EAU #: GK201N5R / 499424

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

Parcel 3 of Land Partition 16-92 situated in the N 1/2 NW 1/4 SE 1/4 of Section 7, Township 39 South, Range 8 East of the Willamette Meridian, Klamath County, Oregon.

Situs Address: 3396 Holbrook St, Klamath Falls, OR 97601
Map and Taxlot: 3908-007DB-01800
Tax Account No.: 494316

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: Veronica Sepulveda
Oregon Dept. of Human Services
P.O. Box 14021
Salem, OR 97309-5024
Phone: (800)826-5675

Executed this 2nd Day of June, 20 21

OREGON DEPT. OF HUMAN SERVICES (ESTATE ADMINISTRATION UNIT)

By: [Signature]
Name: Rachelle Ogo
Title: Administrative Specialist 1

STATE OF OREGON, County of Marion

The foregoing was acknowledged before me this 2nd day of June, 20 21
by [name:] Rachelle Ogo as [title] Administrative Specialist 1 of the Estate
Administration Unit of the Oregon Department of Human Services on its behalf.

[Signature]
Notary Public for Oregon
My commission expires: 12-8-2024

