M-66 11884 NOTICE OF LIEN State Compensation Department, Claimant CLAIM VS. Filed Pursuant Bruce Gerard Houck, aka, Bruce E. Houck, Paula Fina (Mrs. B. G.) to ORS 656. 566 Houck, aka, Paula E. Houck, dba, CHUCK WAGON RESTAURANT Defendant In the County of Klamath Notice is hereby given that the State Compensation Department of Oregon claims a lien All real and personal property of the defendant on the following described property: including: The following real property situated in the County of Klarath, State of Oregon, to-wit: Lot 1 and the Northwesterly rectangular one-half of Lot; in Block 40 of HILLSIDE ADDITION to the City of Klamath Falls, Oregon, saving and excepting therefrom a 20 foot strip off the extreme Southwest side of said lots given to the County to widen the alley through said Block into a 40 foot street, said property in Klamath County, Oregon. Lot 4, Block 9, FAIRVIEW ADDITION, Klamath County, Oregon. 1964 Cadillac Convertible, identified by 1967 License No. FAE982, S/N 64E073116; 1962 Chevrolet 4-door Stationwagon, identified by 1967 License No. 4T4063, S/N 204350139436. for the following amount due the Industrial Accident Fund on account of the employment of workmen by the above-named Defendant during the period January 1 \_, 19 66, in the occupation of Restaurant March 31 784.60 Employer Contributions 41.46 Workmen's Contributions 826.06 80.40 Penalty 57.20 Interest 963.66 17.08 Less payments and other credits 946.58 Amount for which lien is claimed = \$ together with interest at the rate of one per cent per month from the 1st day of \_, 19 66 , on the sum of \$ 808,98 December Written demand for the amount of employer and workmen's contribution: then due for the above period was made on said defendant on June 24 , 19 66 and said defendant failed to pay said amount within ten days after said written demand and was \_, 19<u>66</u> and said thereby in default and subject to the above penalty and interest. No portion of the amounts due during said period for employer or workmen's contributions, penalty, or interest has been paid nor are there any credits against same except as indicated above. STATE COMPENSATION DEPARTMENT DEPARTMENT SEAL STATE OF OREGON ) County of Marion)ss. , being first duly sworm on oath depose and say that I H. E. OSBORN am Director of the Credit & Adjustment Division of claimant Department, and that I am familiar with the above Notice of Lien Claim, that I have authority to execute said Notice, and that the matters set forth therein are true. Subscribed and sworn to before me 17th day of November, 1966

Notary Public for Oregon

My Commission expires APR 1 5 1968

ss Form 565

STATE OF OREGON; COUNTY OF KLAMATH; ss:

Filed for record of request of State Compensation Dept.

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1966 2:11 o'clock P.M., and 11084 on Tago

LOROTHY NOCEMB, County Clerk

By Janua Median

Notary

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