

State Accident Insurance Fund.
MAR 30 10 00 AM 1970

39760

204769-50 (3)

VOL. 7170 PAGE 2434

Claimant,
vs
DONALD RAY OSBORN, AKA DONALD R. OSBORN, DBA
TRIANGLE LOGGING
Defendant

NOTICE OF LIEN
CLAIM
Filed Pursuant
to ORS 656. 564
In the County of
Klamath

Notice is hereby given that the State Accident Insurance Fund of Oregon claims a lien on the following described property:

1958 Ford 2-door Stationwagon, License No. 9G0715, S/N A8RR156487;
1950 GMC Flatbed Truck, identified by 1970 License No. T236220, ID No. 4261198;
1962 Ford Pickup, License No. 2Y5583, S/N E10TH214315;
1960 Ford Pickup, identified by 1970 License No. FDH290, S/N F10J0R26396;
1951 Tec Flatbed Trailer, identified by 1970 License No. TL73344, S/N 7322;

ALSO:

- 1 - 5/8 yard Lorain Shovel, S/N 18429;
- 1 - S-7 Hough Paylogger, S/N 6116, W/1H 188 Diesel engine, 16.9 x 30 6-ply tires, dozer blade, #9 Gearomatic winch, lights, brush guards and ballast box;
- 1 - S-7B Paylogger, S/N 6232, W/GMC 3-53 Diesel engine, 16.9 x 30 tires, Dozer Blade, #9 Gearomatic Winch, lights, brush guards, ballast box;
- 1 - HD-5 AC 4-roller crawler tractor, S/N 11518, W/GMC 2-71 Engine #2A11175, Carco Model 6529 Hyd. Str. Dozer, S/N 1014, E24 Carco Winch, S/N 3030, & HCC Canopy;

for the following amount due the Industrial Accident Fund on account of the employment of workmen by the above-named Defendant during the period December 1, 1969, through January 31, 1970, in the occupation of Logging;

Employer contributions	\$ 678.53
Workman's contributions	2.50
Penalty	681.03
Interest	32.77
	11.41
	\$ 725.21
Less payments and other credits	362.59
Amount for which Lien is claimed	\$ 362.62

together with interest at the rate of one per cent per month from the 1st day of April, 1970, on the sum of \$ 327.65.

Written demand for the amount of employer and workmen's contributions then due for the above period was made on said defendant on March 4, 1970, and said defendant failed to pay said amount within ten days after said written demand and was 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.

(FUND)
(SEAL)
STATE OF OREGON)
County of Marion) ss.

I, B. Rattorfer, being first duly sworn on oath depose and say that I am Credit Manager of claimant Fund, 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.

(Notary)
(Seal)

STATE ACCIDENT INSURANCE FUND

By

Subscribed and sworn to before me
this 25th day of March, 1970

Notary Public for Oregon
My Commission expires APR 15 1972

STATE OF OREGON; COUNTY OF KLAMATH; ss.

Filed for record at request of State Compensation Dept.

this 30 day of March A.D., 1970 at 10:00 o'clock A.M., and duly recorded in
Vol. M-70 of Mech. Liens on Page 2434

Fee 1.50

WM. D. MILNE, County Clerk
By