STATE ACCIDENT INSURANCE FUND C	CORPORATION)	Vol. Mr Page 2897
402 Kickst SF. Jolen Gr 97301	, Claimant,)	NOTICE OF LIEN
20778)	CLAIM
	vs)	Filed Pursuant
C-2 Hydraulic Products, Inc.)	To ORS 656. 566
)	In the County of
)	Klamath
	Defendant)	

Notice is hereby given that State Accident Insurance Fund Corporation of Oregon claims a lien on the following described property: All real and personal property of the defendant including: Summit Lathe 21" x 100" model #R130968

C-2 Hyd Honing Machine Model #H01023798

C-2 Jib Booms model #JB44373, JB44374 & JB44375

V60B Caterpillar Lift Truck, S/N 87M841 with 6,000 lb. capacity, Hydrostatic Transmission, LPG powered, 94" maximum fork height, 70.5 overall lowered height & 56" pallet forks for the following amount due State Accident Insurance Fund Corporation on account of the employment of workers by the above named defendant during the period <u>November 1</u>, 19<u>81</u> through

<u> </u>	March 31, 19 82 , in the occupation of Machine Shop	;
	Employer Contributions	\$ 1445.73
	Workers' Contributions	84.45
		\$ 1530.18
	Penalty	135.85
i.r	Interest	114.39
4.5		\$ 1780.42
113 1	Less payments and other credits	1177.14
163	Amount for which Lien is claimed	\$

together with interest at the rate of one percent per month from the first day of <u>April</u>, 1983, on the sum of 580.08. Written demand for the amount of employer and workers' contributions then due for the above period was made on said defendant on <u>July 23</u>, 1982, and said defendant failed to pay said amount within thirty 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 workers' contributions, penalty or interest has been paid nor are there any credits against same except as indicated above.

(Corp) (Seal) STATE OF CREGON) County of Marion

STATE ACCIDENT INSURANCE FUND CORPORATION Βv

I. <u>H. N. Wineland</u>, being first duly sworn on oath depose and say that I am Credit Manager of claimant State Accident Insurance Fund Corporation, 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 this 23rd day of _____ February 1983

AL

Notary Public for Oregon

My Commission expires

AUG 3 1 1986

Deputy

ar 106 x 10/82

> STATE OF OREGON: COUNTY OF KLAMATH ;ss I hereby certify that the within instrument was received and filed for record on the <u>24</u> day of <u>F^Lh</u> A.D., 19 <u>83</u> at <u>1:45</u> o'clock<u>P</u> M and duly recorded in Vol<u>M83</u>, of <u>Mech Liens</u> on page <u>2897</u> EVELYN BIEEN COUNTY CLERK

FEE \$ 4.00