21412 STATE ACCIDENT INSURANCE			
STATE ACCIDENT INSURANCE	E ELIND		
	- FOND CORPORATION)	- 3 <u>9</u> 3336	
	1	VOLM83 1. 3.	970
lim ou -	Claimant,	NOTION	
Jim Shelby & Sons, Inc.	vs)	NOTICE OF LIEN CLAIM	
)	Filed Pursuant	
)	10 URS 656 Ecc	
	Dofer (
following follow	Defendant)	Klamath	
following described property:	ccident Insurance Fund Corner		
Notice is hereby given that State Ad following described property: including the following	All real and p Situated in Klamath Count 150B Dozer S/il 7205556	on of Oregon claims a liep on al	
ing the following	I situated in Klamath of	ersonal property of the defendan Y, State of Oregon:	
One (1) Used Case 1	1500 b	y, State of Oregon	it
for +b - c			
Northe following amount due State / workers by the above named defenda November 30 19_82_, in the	Aggin	tion on account of the employment of <u>ember 1</u> , 19 <u>32</u> through	
November 30	Accident Insurance Fund Corpora	* :-	
19 <u>32</u> , in the	occupation of Sent	embor account of the employee	
	Employer Comm Rc1	<u>Emper 1</u> , 19, <u>32</u> through	
	Employer Contributions Workers' Contributions	\$ 1 122 70	- 1
		\$ 4,422.78	- 1
	Penalty	\$ <u>75.00</u> \$ 4,497.78	
	Interest	449 78	9
		\$ <u>-278.58</u> \$ <u>-5,226.14</u>	2
900	Less payments and other crea	\$,226.14	
	, ments and other cred	lits <u>2.306.45</u>	Ϋ́.
together with interest at the rate of one on the sum of \$_2,110.03 Writt due for the above period was made on s failed to pay said amount within the	Amount for which Lien is cla		
on the sum of \$ 2 110 per rate of one	Dercent new	imed \$ <u>2,419.69</u>	
due for the above period way. Writt	en demand for the first	day of	
on the sum of \$_2,110_03 Writte due for the above period was made on s failed to pay said amount within thirty of to the above penalty and interest. No pu- contributions, penalty or inter-	days after said written da	3 1983 and Workers' contributions then	
due for the above period was made on s failed to pay said amount within thirty of to the above penalty and interest. No pu contributions, penalty or interest has bee (Corp ² ,) (Seal STATE OF OREGON	ortion of the amounts due due	nd was thereby in defendant	
(Corn ² .)	an paid nor are there any credite	said period for employer or	
		"gailist same a	
STATE OF OREGON	STATE ACCIDENT INS	URANCE FUND CORPORATION	
Set Villerion Set		CORPORATION	
I, <u>H.Wineland</u> , E Manager of claimans State Accident Insura of Lien Claim, that Unave authority to exe			4 No.
Manager of claimant State Accident Insura of Lien Claim, that L have authority to exe	Deina first dui	- Junit Si	
of Lien Claim, that Laave authority to exe	ince Fund Corporation on oath de	POSe and an in the second	
to exe	ecute said Notice and that	I am familiar with	
	internation that the m	atters set forth there	
			a / Lipi
(X, Y) = (X, Y)	Subserie	• (()))	
(Nvitary) (Seal)	Subscribed and sworn this <u>14</u> day of Man	to before mo	
(Netan	this <u>14</u> day of <u>Mar</u>	ch, 1983	10 10 10
(Seal			[b] aR
- (u) ()	Notary Public for Oreg	· _ · -	
	Notary Public for Orer	ION CONTRACTOR	N. M
106×10/82	My Commit i		
10/62	My Commission expires	5	
STATE OF OREGON: COUNTY OF KI I hereby certify that the wit record on the 15th of the wit			
I hereby Cent COUNTY OF M	T >		1944
record on the trat the with	LAMATH :SS		
and duly record and day of Ma	irch instrument was		2
- recorded in Vol	M83 A.D., 19 83 rec	lived and filed -	
FEE \$4.00	, of Mechanics Liens	<u>11:51</u> O'clock h	
- 36 - 5 4.0()	EVELYN PT	on page 3970 TOCK M	6 9
	EVELYN BIEHN COUN by Actuella March	TY CLERK	
	spilluethan Argen	ica pe	
		Deputy	10 10 10 10 10 10 10 10 10 10 10 10 10 1

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A CONTRACTOR

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Lange Street

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