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STATE ACCIDENT INSURANCE FUND CORPORATION
400 High Street S.E., Salem, OR 97312-1000

Claimant,

vs.

[illegible] Trucking Service, Inc.
Freight Service Trucking

Defendant.

NOTICE OF LIEN CLAIM
Filed Pursuant to ORS 656.588
in the County of Klamath

Notice is hereby given that the State Accident Insurance Fund Corporation of Oregon claims a lien on the following described property: All real and personal property of the defendant situated in Klamath County, State of Oregon.

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 [illegible] 19[illegible] through [illegible] 19[illegible] in the occupation of [illegible]

Employer Contributions	$ [illegible]
Workers' Contributions	[illegible]
Penalty	$ [illegible]
Interest	[illegible]
	[illegible]
	$ [illegible]
Less payments and other credits	[illegible]
Amount for which Lien is claimed	$ [illegible]

together with interest at the rate of one percent per month from the first day of [illegible] 19[illegible] on the sum of $ [illegible]. Written demand for the amount of employer and workers' contributions then due for the above period was made on said defendant on [illegible] 19[illegible] 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 OREGON)
County of Marion) ss.

SAIF ACCIDENT INSURANCE FUND CORPORATION

By [illegible]

[illegible] being first duly sworn on oath deposes and says 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 5th day of June 19[illegible]

(Notary)
(Seal)

Notary Public for Oregon

My Commission expires [illegible]

STATE OF OREGON, COUNTY OF KLAMATH ss.

Filed for record at request of State Accident Ins. Fund Corp. the 6th day of June A.D., 19 87 at 12:08 o'clock P M., and duly recorded in Vol. M97 of County Lien Deeds on Page 9971

FEE $5.00

Evelyn Biehn, County Clerk
By [illegible]