77304 STATE ACCIDENT IN SURANCIE FUND CORPORATION Vol 17 100 High Street S.E., Salem, CR 37312-1000 Page 14252 402921-106 Claimant, NOTICE OF LIEN CLAIM Ý8 Richard W. Batsell, Dba **Filed Pursuant** Rick Batsell's Exton Service to ORS 656 566 in the County of Defendant Notice is hereby given that the State Accident Insurance Fund Corporation of Oregon claims a lien on the following , Klamath clascribed property: All real and personal property of the desendant situated in Klamath County, State of Oregon. Including the following: All that portion of the SW 1/4 of the SE 1/4 of Section 18, Township 40 South, Range 10 E.W.M., Klamath County, Oregon, Lying Southerly and Westerly of the Klamath Irrigation District Drain Canal Number 5. 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 $\frac{0 \text{ ctober } 1}{1}$, $19 \frac{85}{85}$ through $\frac{May}{1}$, $\frac{May$ **Employer** Contributions 3 1,062.02 Workers' Contributions 281.58 Ó, 1,343.60 Panalty 2 63.79 Interest 125.28 Ċ 1,532.67 Less payments and other credits **UIC** 791.00 Amount for which Lien is claimed 87 741.67 together with interest at the rate of one percent per month from the first day of due for the above period was made on said defendant on <u>May 20</u>, 19 87, 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. STATE OF OREGON STATE ACCIDENT INSURANCE FUND CORPORATION County of Marion `__) ss. By. G. J. Nemec Manager of claimant State Accident Insurance Fund Corporation, and that I am familiar with the above Notice of Lish Claim, that I have authority to execute said Notice, and that the matters set forth therein are true. -- 7- (ener Subscribed and sworn to before me this ______ day of ______ August this <u>6th</u> day of _ 0409 O Notary (Seal Notary Public for Oregon gh My Commission expires ____ 4-28-40 X103 12/20 STATE OF OREGON: COUNTY OF KLAMATH: ss. Filed for record at request of <u>State Accident Ins. Fund Corporation</u> the _____ A.D., 19 87 at 9:37 o'clock A M., and duly recorded in Vol. M87 of of _____ County Lien Docket on Page _____ 14252 FEE \$5.00 Evelyn Biehn, County Clerk