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## STATE OF OREGON DEPARTMENT OF HUMAN RESOURCES ADULT & FAMILY SERVICES DIVISION

Ket Vol M88 Page\_ ADULT & FAMILY SERVICES DIVISION Third Party Recovery Unit Post Office Box 14023 Salam, Oregon 97309

## NOTICE OF LIEN

NOTICE IS HEREBY GIVEN, that the Adult and Family Services Division has rendered assistance to Harvey G. Beards, et al, who sustained injuries on or about July 7, 1986, in or near Chemult, Oregon, and the Adult and Family Services Division hereby asserts a lien to the extent provided in ORS 416.510 to 416.610, for the amount of such assistance upon any amount due and owing the said Harvey G. Beards, et al, under a judgment, settlement or compromise from Marvin Erickson, dba Erickson Shell, et al, alleged to have caused such injuries and from any other person or public body, agency or commission liable for injury or obligated to compensate the injured person on account of such injuries.

> Adult and Family Services Division Freddye Webb-Petett, Administrator

Third Party Recovery Unit Personal Injury Liens Program

Supervisor

STATE OF OREGON County of Marion )

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I, Barbara J. Lange, being first duly sworn on oath say: That I am the Supervisor of the Personal Injury Liens Program, Adult and Family Services Division; that I have read the foregoing Notice of Lien and know the contents thereof and believe the same to be true.

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My Commission Expires: 10-20-89 4 3.5

Notary Public for Oregon

Subscribed and sworn to before me this 5th day of February, 1988.

STATE OF OREGON: COUNTY				an a
Filed for record at request of	State of Oreas	and Family Service		
FEE \$5.00	. 19 <u>88</u> at <u>3:19</u> County Lien Docke	M., and duly	recorded in Vol. N	188 day
		Evelyn Biehn, By	County Clerk	