THEODORE R. KULONGOSKI ATTORNEY GENERAL 72082 12-01-93A09:41 RCVD

THOMAS A. BALMER DEPUTY ATTORNEY GENERAL



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DEPARTMENT OF JUSTICE SUPPORT ENFORCEMENT DIVISION 1495 EDGEWATER N.W., SUITE 290 SALEM, OR 97304 Telephone: (503) 373-7300 FAX: (503) 373-7340 TDD: (503) 378-5938

October 18, 1993

PLEASE RETURN TO:

Department of Justice Support Enforcement Division Central Operations Section 1495 Edgewater N.W., Suite 290 Salem, OR 97304

CREDITOR:

DEBTOR :

EXECUTION DATE:

JUDGMENT INFORMATION:

State of Oregon, Department of Human Resources, and LORI R. CHAPIN

JON R. TRACY

.08/13/91

Amount of Judgment : \$4757.00 Amount of Costs : Amount of Attorney Fees:

FULL OR PARTIAL SATISFACTION:

cc: Obligor Obligee

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LIEN RECORD ABSTRACT

The undersigned states:

А.

в.

X

<u>X</u>

X

х

<u>Creditor/Prevailing Party Information:</u> 1. The creditor/prevailing party is:

State of Oregon, Department of Human Resources

and the address of the creditor is:

1495 Edgewater N.W., Suite 290

Salem, Oregon 97304

under judgment, decree, order or petition entered on 08/13/91 (date) in the District/Circuit Court for JOSEPHINE (County) of Oregon (State) under Case No. 91DR0253.

2. The Creditor's attorney's name is

Attorney's Address is:

Attorney's Phone No. is:

Debtor/Losing Party Information: 1. The Debtor/Losing Party is:

JON R. FRACY

2. Whose Address is (if known):

2534 HOLCOMB SPRINGS RD

GOLD HILL, OR 97525-9623

3. Social Security No. (if known):

553-74-7170

C. Judgment Information:

1. The amount of the judgment is: \$4757.00

2. The amount of the costs is:

SED No. 0338W3106C41

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3. The amount of attorney fees, if any is: The Real Property to be Affected (check appropriate box): D. All real property of the debtor/losing party, now or hereafter acquired in KLAMATH County as provided under ORS 18.320 and X 18.350. The following described real property of debtor (legal description as set forth or on attached Exhibit): IN WITNESS WHEREOF, the undersigned person or persons have executed this abstract this ______ date of ______, 19 ____. stur Authorized Representative for the State STATE OF CREGON ss. County of POLK The foregoing instrument was acknowledged before me this OCHODER, 1993, by _____A.U. Kapteyn 21 _ day o£ ____ Ð Notary Public for Oregon My commission expires: _____ OFFICE SEAL JUDY L PETTY WT DOWNESSION EXTERNAL CONTROLS Page 2 - Lies Record Abstract PLA 200 (01/93) STATE OF CHEGON COUNTY OF KLAMATH: S.
 Piled for record or respect of
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_ the _____ day of <u>Co. Hen Nocket</u> on Page <u>11770</u> Evelyn Biehn County Ckrk By <u>Saudana Michiel natola</u> FEE \$15.00

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