THEODORE R. KULONGOSKI ATTORNEY GENERAL 72089

12-01-93409:41 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

November 8, 1993

PLEASE RETURN TO:

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

Department of Human Resources

CREDITOR:

DEBTOR:

EXECUTION DATE:

JUDGMENT INFORMATION:

ROBERT K. SAVOIE 02-21-89

State of Oregon,

Amount of Judgment : per DHR records

Amount of Costs : Amount of Attorney Fees:

FULL OR PARTIAL SATISFACTION:

cc: Obligor Obligee

n nim.

Lien Abstract Cover Sheet FLS 200A (12/92)

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LIEN RECORD ABSTRACT

The undersigned states:

А.

в.

X

X

X

C.

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<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 02-21-89 (date) in the District/Circuit Court for MARION (County) of Oregon (State) under Case No. 152644.

2. The Creditor's attorney's name is

Attorney's Address is:

Attorney's Phone No. is:

<u>Debtor/Losing Party Information:</u> 1. The Debtor/Losing Party is:

ROBERT K. SAVOIE

2. Whose Address is (if known):

168 APPLE BLOSSOM AVE N.

KEIZER, OR 97303-6072

3. Social Security No. (if known):

542-74-6899

Judgment Information:

1. The amount of the judgment is: per DHR record

2. The amount of the costs is:

SED No. 047015264441

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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 ______ after A IN Authorized Representative for the State STATE OF OREGON ss. The foregoing instrument was acknowledged before me this 94n day Maxamber, 1993, by 4W Kaptayn County of POLK of Notary Bublic for Oregon My commission expires: OFFICIAL SEAL JEAN P. WILSON MOTARY PUBLIC-OREGON COMMISSION NO DIROS MY COMMISSION EXPIRES NOV 7. 1515 1.5000 Page 2 - Lien Record Abstract FLS 200 (01/93) STATE OF OREGON: COUNTY OF KLAMATH: ss. ____ day lst _____ the __ A.D., 19 93 at 9:41 o'clock A.M., and duly recorded in Vol. M93 Dept. of Justice Filed for record at request of _ Dec. of _____ of _____ Co. Lien Docket Evelyn Biehn - County Clerk By Dauena Menteriate FEE \$15.00