

96201

FORM OF CLAIM FOR DAMAGES

TO THE BOARD OF COUNTY COMMISSIONERS of Skamania County, Washington:

PLEASE TAKE NOTICE that in accordance with Chapter 36.45 of the Revised Code of Washington, I Dawn Marie Moser hereby present you with my claim for damages against the County of Skamania, State of Washington, with the information required to be given by RCW 36.45.020 as follows:

1. That the injury for which I claim damages against the County of Skamania, State of Washington, occurred on or about the 3rd day of August, 19 83.

2. That the place of injury was 1 mile EAST of Stevenson, WA.

3. That the location and description of the defect which caused the injury are

County Dump Truck hauling gravel at above location

4. That the injury is described as follows: Front windshield on my car was

chipped by flying gravel in several places

5. That the amount of damages claimed is as follows: Windshield : \$233.90

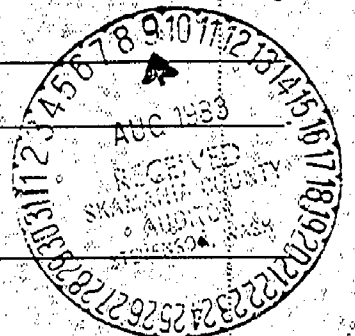
(Two hundred-thirty-three dollars and 90/100 in)

6. That the actual residence of the claimant at the time of presenting and filing this claim is P.O. Box 264, Carson, WA.

7. That the actual residence of the claimant for a period of six months immediately prior to the time that this claim accrued was same as above

DATED: August 8, 19 83.

Dawn Moser
(Claimant)



DAN'S AUTO BODY AND REPAIR

P. O. BOX 251

STEVENSON, WASH. 98648

Phone (509) 427-5248

BODY AND FENDER REPAIRS & EXPERT REFINISHING

Dawn

NAME _____

ADDRESS

DATE _____

PHONE

DATE
WANTED

[illegible]

THIS ESTIMATE IS BASED ON OUR INSPECTION AND DOES NOT COVER ADDITIONAL PARTS OR LABOR WHICH MAY BE REQUIRED AFTER THE WORK HAS BEEN STARTED. AFTER THE WORK HAS STARTED, WORN OR DAMAGED PARTS WHICH ARE NOT EVIDENT ON FIRST INSPECTION MAY BE DISCOVERED. NATURALLY THIS ESTIMATE CANNOT COVER SUCH CONTINGENCIES. PARTS PRICES SUBJECT TO CHANGE WITHOUT NOTICE. THIS ESTIMATE IS FOR IMMEDIATE ACCEPTANCE.

THIS WORK AUTHORIZED BY

TOTAL	720 87
SALES TAX	13 03
GRAND TOTAL	233 90

ESTIMATE SHEET AND REPAIR ORDER

A--70501.