

108277

FILED IN RECORD
CLERK OF COURT
BY Thomas E. Payton
Nov 17 2 51 PM '89
P. Lowmy
GARY L. OLSON

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 LYDIA B. PAYTON, DAUGHTER OF THOMAS E. PAYTON, AND ACCOMPANIED BY HIM, 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 15 day of NOVEMBER, 1989.

2. That the place of injury was SKAMANIA COUNTY COURTHOUSE PARKING LOT

3. That the location and description of the defect which caused the injury are BRYAN SNELL BACKED FROM A 90° PARKING SPACE FACING THE COURTHOUSE, INTO MY STOPPED CAR (HAVING JUST BACKED OUT OF A 90° PARKING SPACE FACING THE OLD SHERIFF'S OFFICE), DENTING THE RIGHT REAR 1/4 PANEL.

4. That the injury is described as follows: A DENT IN THE RIGHT REAR 1/4 PANEL IMMEDIATELY AHEAD OF THE WRAP-AROUND TAIL LIGHT.

5. That the amount of damages claimed is as follows: \$ 261.61

6. That the actual residence of the claimant at the time of presenting and filing this claim is Box 306, NORTH BONNEVILLE, WA. 98639

7. That the actual residence of the claimant for a period of six months immediately prior to the time that this claim accrued was Box 306, NORTH BONNEVILLE, WA. 98639

DATED: NOVEMBER 17, 1989

for [Signature]
Rev. Thomas E. Payton (Father)
(Claimant)

NOTE: Personal Property (Car, etc.) damages are to be accompanied by estimated repair costs. Additional information required by NCS 2-4 of this form may be attached on the back of this Claim for Damages.

Received
Indirect
Indirect
Indirect
Indirect
Indirect

BODY AND FENDER REPAIRS • EXPERT REFINISHING

NAME

ADDRESS

PHONE

DATE
WANTED

DATE _____

INVOICE NO

REGISTRATION NO.

HOURLY RATE

YEAR-MODEL-COLOR 1966		MAKE OF CAR Dodge	BODY TYPE Slender	LICENSE No. 11	SERIAL No	MFG PAINT NO	MILEAGE
REPAIR	REPLACE	SUBLET WORK			PARTS AND MATERIALS	LABOR	REFINISHING
✓		4-13-				5.00	
		RePaint Damage Area			30.00	2.5	
		ReStripe 1/2			2.00	3	
					37.00	8.3	hrs
						207.50	
		TOWING					
SUBJECT TO INVOICE PRICE CHANGES					SUB TOTALS		

SUBJECT TO INVOICE PRICE CHANGES

SUB TOTALS

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, WORK ON 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

ESTIMATE SHEET AND REPAIR ORDER

TOTAL

244.

SALES TAX

72

**GRAND
TOTAL**

261.

261.61

A-7

Stevenson, Washington, 11-17-89

TO COUNTY AUDITOR DR.
Skamania County, Washington

FILING ☒
RECORDING FILE NO. 108277 AMOUNT NC

Agree. & Lease _____

Liens _____

Mines _____

Deed _____

Mortgage _____

Satisfactions _____

~~None~~ file Claim for Damages

Surveys _____

Plats _____

UCC _____

Skamania County

to

Lydia B. Payton, et al

Mary M. Olson

COUNTY AUDITOR

By P. Lowmy

DEPUTY

23304