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SKAMANIA CO. WASH
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Indirect	
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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 Jeff Bligh, (for) Michelle Bligh 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 16th day of August, 19 91.

2. That the place of injury was Skamania County Fair, behind (West End) the Animal Barns.

3. That the location and description of the defect which caused the injury are No attendant was available on Trolley car ride, to notify driver of emergency or people getting on/off ride.

4. That the injury is described as follows: multiple abrasions / multiple contusions / Hematuria - Blood in urine

5. That the amount of damages claimed is as follows: Amount Open, Michelle is still seeing doctor, and we have not received Billings from Hospital, Doctor, Ambulance.

6. That the actual residence of the claimant at the time of presenting and filing this claim is 114 N.W. McKinley, Stevenson, WA. 98648

7. That the actual residence of the claimant for a period of six months immediately prior to the time that this claim accrued was ^{since} Feb. 14, 1989, 114 N.W. McKinley, Stevenson, Wa.

DATED: 8/26/91, 19 91.

Jeff S. Bligh
(Claimant)

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