Auditor's Recording Number RECORD AFTER APPEAL PERIOD

XXCL DE AND STATE	ASSIFII SIGNATEMENT (ROW) Bligh	'S NOTICE O ED FOREST L TED FOREST OF COMPENS 84.93.120, 130, 14	AND LAND SATING	G TAX	Jul G	ILED FOR KAMAHA YAKAMAN KAMAHA	6 AH '90 ISON		S 40
Vou are hereby	anillad th	at the falls when		L		** **********************************			
You are hereby r							Λ		**
		mber land						Teal K	<u>:/</u> .
This is	to co	ver the 1 a	acre t	hat is be	ing conve	rted to	home s	site.	(min) jimu a
owner wi	definition 33.120 citten	sub (5) (and/or provision sub (5) (and in the sub by the own	is of fore: <u>) Det</u> i an o	st land as follow ermination pportunit	vs: n by the v to be h	assesso	r, afte	er giving	<u>th</u> e
and used	lfor	growing and	l harv	esting ti	nber.	Be Pri		SKAMANIA COUN REASURER'S OF	
You are hereby r True & Fair Value of Land at Time of Removal	LESS	Classified or Designated Value at Time of Removal	MULTI- PLIED BY	Last Levy	MULTI- PLIED BY	the following	equals	JUN - 6 19 Ima J. Corr Treasure Compensating Tax	nwali
\$ 1,000	-	\$ 84	×	\$7.36879	×	1.0	100	\$ 67.50	
			RECORDING FEE + \$ 7.00						
Number of years in classification or designation, not to exceed 10.				exceed 10.	TOTAL T	AX DUE	THE STATE OF THE S	\$ 74.50	
The compensation become a lien on	ng tax is o	due and payable and shall be sub	to the C	ounty Treasur	er 30 days fro	m the date	of this not	lice. The tax	shall
You may apply for 84.34. If the application is denied, or, if applications of the DATE OF	or classifi lication is	cation as either received within	Open Sp	pace farm/agric of this notice, r ed from Open	ultural land o	r Open Spa	ace Timber	I and under t	RCW ation
	24-90	_ MENT DUE:	6-2		SESSOR;	llando	W/. //	mone	_
FORM REV 62 004	7 (3-89)					0			

Within 30 day writing, settin county Board	SENDER: Complete items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the reve card from being returned to yo 1. The return receipt fee will a to and the date of delivery. For additional fees the following for fees and check box(ea) for additional service(s) reques 1. L. Show to whom delivered, date, and addressee's ac (Extra charge) 3. Article Addressed to: Lavern Bligh	the owner in imo /al to the					
	MP 1.09 R Little Rock Cr : Cook Wa 98605	P 070 774 625 Type of Service Insured Insured Contified Contified) 				
Within 30 d. (farm/agricultudenied, or, if	5. Signature — Address X) To Control File 8. Signature — Agent X 7. Date of Delivery	or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid)	Open Space app! cation is				
Commencing or be assessed on	the sair		e, such land shall				
The compensati	er o						
1. Transfer to	a govern ic so the second		6				
A taking throof eminent contact.	domain I 😇 🙃	У	having the power				
Sale or tran land.	ster of the stern	101	nt interest in the				
d. Donation of the discrete d							

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