

128175

Return Address:

James D. Barnes Sr.
P.O. Box 1198
Stevenson, WA.
98648

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Please Print or Type Information.

Document Title(s) or transactions contained therein:	
1.	Claim for Damages
2.	
3.	
4.	
GRANTOR(S) (Last name, first, then first name and initials)	
1.	Skamania County
2.	
3.	
4.	
<input type="checkbox"/> Additional Names on page ____ of document.	
GRANTEE(S) (Last name, first, then first name and initials)	
1.	James D. Barnes Sr.
2.	
3.	
4.	
<input type="checkbox"/> Additional Names on page ____ of document.	
LEGAL DESCRIPTION (Abbreviated: I.E., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)	
<input type="checkbox"/> Complete legal on page ____ of document.	
REFERENCE NUMBER(S) Of Documents assigned or released:	
<input type="checkbox"/> Additional numbers on page ____ of document.	
ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER	
<input type="checkbox"/> Property Tax Parcel ID is not yet assigned.	
<input type="checkbox"/> Additional parcel #'s on page ____ of document.	
The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.	

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 James David Barresse Sr. 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 29th day of Dec., 1995.

2. That the place of injury was 311 Gordon RD.
Hemlock, WA. 98610

3. That the location and description of the defect which caused the injury are
Skamania Drug task force

4. That the injury is described as follows: The "drug task force" searched my home, and seized my property (which has not all been returned) & damaged my property. The search & seizure was for my neighbor.

5. That the amount of damages claimed is as follows: LOSS WAGES: 1873.87; BROKEN EQUIPMENT \$181.46; ATTORNEY FEES \$2,174.70, INCLUDING COSTS, \$5377.03 TOTAL TO DATE, MORE LATER.

6. That the actual residence of the claimant at the time of presenting and filing this claim is 1212 Kanaka creek RD.
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 311 Gordon RD.
Hemlock, WA. 98610

DATED: 5-3-97, 1997.

James D. Barresse Jr.
(Claimant)

NOTE: Personal Property (Car, etc.) damages are to be accompanied by estimated repair costs. Additional information required by No.s 2-4 of this form may be attached on the back of this Claim for Damages.

Property not returned or replaced

S.K.S 47 (rifle)	\$170.00
One sealed case ammunition (7.62x39). 1000 rounds.	\$360.00
Two locks, \$20.00 each. (work item)	\$40.00
Insulated bib carharts. (work item)	\$110.00
Peltor ear protection. (work item)	\$28.00
Panasonic stereo radio cassette recorder.	\$89.00
Damaged software (modest estimate)	\$250.00
Total:	\$1047.00