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SKAMANIA COUNTY
AUDITOR

FILED
SKAMANIA COUNTY
OCT 30 9 04 AM '02
P. Lawry
J. MICHAEL THOMPSON

SKAMANIA COUNTY CLAIM FOR DAMAGE FORM

CLAIMANT: THIS CLAIM MUST BE FILED WITH THE	FOR OFFICE USE ONLY:
SKAMANIA COUNTY CLERK OF THE BOARD Skamania County Auditor's Office Skamania County Courthouse 240 North West Vancouver Avenue, Room 27 Stevenson, WA 98648	CLAIM NO. _____ DATE FILED: _____ COPIES TO: _____ ATTACHMENTS: YES(<input type="checkbox"/>) NO

- Name (including spouse if married): (Please Print)
Ila Mae Thompson
- Po Box 595 - Carson WA 98610
Address City State Zip
- HM Phone: 427-8831 WK Phone: 427-9400 MSSG Phone: 427-8831
- Date and time of incident: 1971 to 1997
- Location of incident:
Skamania County Courthouse - Civil Service Work
Overtime back pay
- Describe in narrative form and in detail exactly how the incident occurred: (County)
No pay 1971 to 80 (?) Found they should have paid me.
1996 State Auditor found County did not pay me correctly.
Should have been time and a half - never knew - asked
if I could get back pay from Auditor. Accountant they said no.
this year 2002 State Auditor asked if I got back pay said no.
- What is the amount of damages claimed arising out of the following circumstances
(Include estimates and bills, if available): 2/1971 to 11/1996 Back pay
(Brad Andersen, Prosecutor (put all years down) \$At time 1/2 for
hours worked in those years.

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8. Please list name and address of any and all witnesses or persons involved:
(Please Print)

Bill Clasner - Stevenson
Sandra Heirman - Stevenson
Gary Olson - North Bonneville

9. Describe the damages or injuries you sustained as a result of the incident:

Was not notified that I could receive back overtime
could have used the money for work rendered to
County

10. Was incident investigated by a police officer? Sheriff _____ State Patrol _____
City _____

N/A

11. If a vehicle was involved in the incident, describe: Make N/A
Model _____ Year _____ State _____ License No. _____
Insurance Company _____ Policy Number _____

12. Describe what you did after the incident occurred: After finding out I should
have been paid for overtime back pay sent letter to the
County Auditor, Brad Anderson, Pres., Commissioners, and
Civil Service Board

13. Describe the conversations you had, if any, with County personnel during or after
the incident occurred. Gary Olson, Sandra Heirman, Several years
later asked Judy Carter if I could get back pay - All said no.

14. How did you identify the County as the party responsible for your damage?
They are the Administrator of Knowledge of the laws
to inform and implement the rules and laws for the County
and pay accordingly.

I certify under penalty of perjury under the laws of the State of Washington that the
information contained in this claim is true and correct.

DATED THIS 30th DAY OF October, 2002

Mae Thompson
Claimant's Signature

File Name: Commis/Risk Mng/Claims/Claim For Damages

NOTE: Personal property (car, etc.) damages are to be accompanied by 2 estimates for repair costs. The Skamania
County Risk Manager will investigate this claim. The decision to honor this claim will be based upon that investigation.
Making a false report or providing false evidence is a crime and punishable by fine and/or imprisonment. Additional
pages may be attached if needed to answer the questions.