

<b>WHEN RECORDED RETURN TO:</b>  Port of Skamania County PO Box 1099 Stevenson WA 98648 port@portofskamania.org
<b>DOCUMENT TITLE(S)</b>  Resolution 4-2014 Agent Appointed to Receive Claims RCW 4.96
<b>REFERENCE NUMBER(S)</b> of Documents assigned or released:  <input type="checkbox"/> Additional numbers on page _____ of document.
<b>GRANTOR(S):</b>  Port of Skamania County  <input type="checkbox"/> Additional names on page _____ of document.
<b>GRANTEE(S):</b>  Port of Skamania County  <input type="checkbox"/> Additional names on page _____ of document.
<b>LEGAL DESCRIPTION</b> (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):  <input type="checkbox"/> Complete legal on page _____ of document.
<b>TAX PARCEL NUMBER(S):</b>  <input type="checkbox"/> Additional parcel numbers on page _____ of document.
The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

**PORT OF SKAMANIA COUNTY  
RESOLUTION 4-2014**

**APPOINTMENT OF AGENT TO RECEIVE CLAIMS FOR DAMAGES  
(RCW 4.96.020)**

**WHEREAS**, pursuant to the provisions of RCW 4.96.020 the governing body of each local governmental entity shall appoint an agent to receive any claim for damages made under Chapter 4.96 RCW; and

**WHEREAS**, the identity of the agent and the address where he or she may be reached during the normal business hours of the local governmental entity are public records and shall be recorded with the auditor of the county in which the entity is located; and

**WHEREAS**, all claims for damages against a local governmental entity, or against any local governmental entity's officers, employees, or volunteers, acting in such capacity, shall be presented to the agent within the applicable period of limitations within which an action must be commenced; and

**WHEREAS**, the failure of a local governmental entity to comply with the requirements of this section precludes that local governmental entity from raising a defense under Chapter 4.96 RCW.

**NOW THEREFORE, BE IT RESOLVED**, that the Board of the Port of Skamania County appoints the agent listed below to receive any claims for damages made under Chapter 4.96 RCW.

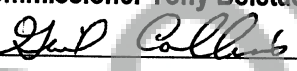
Agent Appointed:	John M McSherry
Office Address:	212 SW Cascade Avenue Stevenson, WA 98648
Business Hours:	Monday – Friday; 8 am – 5:00 pm

**BE IT FURTHER RESOLVED**, by the Board of the Port of Skamania County, the Finance Manager of the Port of Skamania County shall record this document with the Skamania County Auditor.

**PASSED IN SESSION THIS 14<sup>th</sup> Day of January 2014.**

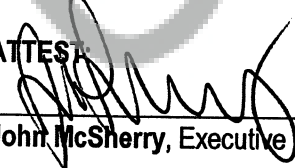
**PORT OF SKAMANIA COUNTY COMMISSIONERS**

  
\_\_\_\_\_  
Commissioner Tony Bolstad, President (District 1)

  
\_\_\_\_\_  
Commissioner Gail Collins, Secretary (District 2)

  
\_\_\_\_\_  
Commissioner Kevin Waters, Vice-President (District 3)

**ATTEST**

  
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John McSherry, Executive Director