

	DESCRIPTION	ROLL NO	ODOMETER
AB 1-3	DOWNING, JACK L. 2803 N. COMMERCIAL		
A 2-4	DREW, JOHN 3102 N. GANTENBEIN		
A 4-7	DUMAS, LUCILLE 3316 N. GANTENBEIN		
A 4-7	DYE, JONAS 3316 N. GANTENBEIN		
RS 3-4	EADEN, ALEX, JR. 2740 N. VANCOUVER		
A 2-5	EDWARDS, CHESTER 227 N. MONROE		
A 4-11	ELLIS, ROSCOE 233 N. COOK		
R 8-9	FAULKNER, FANNIE 327 N. FARGO		
E 2-5	MACK, FERRELL A. 2732 N. KERBY		
R 9-7	FIELD, HERBERT 417 N. MONROE		
E 2-7	FISCHMAN, STEPHEN M. 553 N. KNOTT		
E 3-7	FLORES, JESSIE 540 N. KNOTT		
E-4-7	FLOWERS, LONNIE 423 N. RUSSELL		
A 2-8	FRAHS, THEODORE 3111 N. VANCOUVER		
AB 3-2	FRARY, MYRA L. 2932 N. COMMERCIAL		
R 10-2	FRYKMAN, MARGARET 3137 N. COMMERCIAL		
R 10-10	GARNETT, ALBERT 529 N. MONROE		
RS 3-6	GLASS, LILLIAN (CONLEY) 2728 N. VANCOUVER		

RESIDENTIAL RELOCATION RECORD

Project Name Edgemoor Parcel No. R-8-9 Advisor Jcc
 Client's Name Edwigner Fawcett Phone _____
 Address 327 N Edgemoor Ethn B Age 55

- Male Family Married Renter/Occupant
 Female Individual Single Owner/Occupant

Family Composition

Total Number in Family 1
 _____ wife, husband

Other: Relation Age Relation Age

Economic Data

Employer \$ _____
 Address _____
 Other Source of Income
Daywork Domestic \$ 400 -
 \$ _____
 Total Monthly Income \$ (400 -)

- Eligible for Public Housing YES NO Presently Receiving Welfare YES NO
 Eligible for Welfare YES NO Other Assistance _____
 Eligible for (Other) YES NO

Claimant was displaced from real property within the project area on or after date of pertinent contract for Federal assistance and/or date of HUD approval of budget for project:
 YES NO

Date of initial interview 5-11-71 Date of Info pamphlet delivery _____
 Date Notice to Move given NO Date Effective _____ Expires _____

CLAIMANT'S INITIAL DATE OF OCCUPANCY _____

(a) for owner-occupants - indicate initial date of occupancy and ownership

Date of initiation of negotiations for purchase of property 8-31-71
 Date of Acquisition 8-31-71
10-6-71
 Date of letter of intent _____
 Date of move 11-20-71

DWELLING UNIT FROM WHICH RELOCATED

Private Sales	<input checked="" type="checkbox"/>	Single Family	<input checked="" type="checkbox"/>
Private Rental	<input type="checkbox"/>	Duplex	<input type="checkbox"/>
Other	<input type="checkbox"/>	Multiple Family	<input type="checkbox"/>

Age of Housing Unit 1905

Size of Habitable Area 1464

Furnished with claimant's furniture
 YES NO

Total Number of Rooms 8 Rent Paid \$ _____ Utilities _____

Number of Bedrooms 4 Monthly Housing Payments \$ _____ Taxes _____

Liens \$ _____ (please explain) _____

Acquisition Price \$ 7,000 Amenities _____

REPLACEMENT DWELLING UNIT

Address 6609 COCKERVILLE AVE. TAKOMA PARK, M.D. 20783 LPA Referred _____ Self Referred

Private Sales	<input checked="" type="checkbox"/>	Single Family	<input checked="" type="checkbox"/>
Private Rental	<input type="checkbox"/>	Duplex	<input type="checkbox"/>
Other	<input type="checkbox"/>	Multiple Family	<input type="checkbox"/>

Outside city Outside state

Age of Housing Unit _____

Size of Habitable Area _____

No. of Rooms 6 No. of Bedrooms 3

For Claimants Who Purchased

For Claimants Who Rented

Purchase Price of Replacement Dwelling \$ 22,500

Rent \$ _____

✓ Taxes \$ _____

Utilities \$ _____

RHP or TACO (including incidental costs) \$ 14,940

Total Rent Assistance \$ _____

Amount of Annual Payment \$ _____

No. of Housing Referrals to:

Agency Referrals:

0 Standard Sales

_____ MCW

_____ HAP

_____ OTHER (_____)

_____ Standard Rent

_____ Food Stamp

Legal Aid

_____ Other (_____)

Benefits Received

Date _____ Ck # _____ Type _____ Amount \$ _____

Date _____ Ck # _____ Type _____ Amount \$ _____

Date _____ Ck # _____ Type _____ Amount \$ _____

RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME FAULKNER, Fannie RELOCATION ADVISOR JC
 ADDRESS 327 N. Fargo PHONE 287-9812 PROJECT NAME Emanuel ORE R-20
 SEX F ETHN B VETERAN _____ AGE 55 PARCEL NO. R 8-9
 MARITAL STATUS Married TENURE Owner
 DISABILITY _____ INDIV X FAMILY _____
 ELIGIBLE FOR: PUBLIC HOUSING _____ FHA 235 _____
 RENT SUPPLEMENT _____ OTHER _____
 INITIAL INTERVIEW 5-11-71 DATE INFO PAMPHLET DELIVERED _____
 NOTICE TO MOVE No DATES EFFECTIVE _____ EXPIRATION DATE _____
 NOTIFY IN CASE OF EMERGENCY _____

DATE ON SITE:	<u>April 16, 1959</u>
INITIATION OF NEGOTIATIONS:	<u>August 31, 1971</u>
DATE OF ACQUISITION:	<u>October 6, 1971</u>

ECONOMIC DATA

FAMILY COMPOSITION

Employer _____ \$ _____
 Address _____
 MCW _____
 Social Security _____
 Pension _____
 Other _____
Day work domestic
 TOTAL MONTHLY INCOME \$ 400
Estimated

Name	Relation	Age

DWELLING UNIT FROM WHICH RELOCATED

		S	SS
Subsidized Sales	Single Family		X
Subsidized Rental	Multiple Family		
Public Housing	Duplex		
Private Rental	Mobile Home		
Private Sales		X	

Age of Structure 1905 No. Rooms 8
 No. Bedrooms 4 Furn. X Unfurn _____
 Utilities \$ _____
 Monthly Payments (Rent) \$ _____
 Acquisition Price \$ 7,000.00
 Taxes \$ _____ Equity \$ _____
 Liens \$ _____

Size of Habitable Area 1,464

HOUSING REFERRALS

AGENCY REFERRALS

Address	Bedrooms

Name of Agency	Date
Multnomah County Welfare	
Food Stamp Program	
Housing Authority	
Legal Aid	<u>8/30/71</u>
FISH	
Health Dept.	

AGENCY ACTION:	REASONS:
Appeals	
Evicted	
Refused Assistance	
Address Unknown (tracing)	
Other (death, etc.)	

TEMPORARY RELOCATION

Within Project	
Outside Project	

Date Moved In _____
 Address _____
 Reason _____

REPLACEMENT DWELLING UNIT

Client Referred X LPA Referred _____

Address 6609 Cockerille Avenue Phone _____ Date of Move 11-20-71
Takoma Park, Md. 20783

WHERE RELOCATED:

				S	SS
Same City		Subsidized Sales		X	
Outside City		Subsidized Rental			
Out of State	X	Public Housing			
		Private Rental			
		Private Sales	X		

Furnished _____ Unfurnished _____ Number of Rooms _____ Number of Bedrooms 3 Habitable Area _____

Utilities \$ _____ Monthly Payments (Rent) \$ _____ Purchase Price \$ 22,500.00

Age of Structure: _____ Taxes \$ _____ Equity \$ _____ Distance Moved Away _____

Name of Moving Company _____ Name of Realtor _____

BENEFITS RECEIVED

Type	Ck #	Date	Amount
RHP	119 EH	Oct. 29, 71	\$ 14,940.00
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Sales)			\$
Fixed Moving	262 EH	1/21/72	\$ 1,385.70
Actual Move			\$
Storage			\$
Incidental	27865 G	11/16/71	\$ 179.00
Interest			\$

Purchase Price	\$ <u>22,500.00</u>
Down Payment	\$ _____
RHP	\$ <u>14,940.00</u>
Total Down	- \$ _____
Total Mortgage	\$ _____

TOTAL BENEFITS RECEIVED \$ 16,504.70

REALTOR: Mr. Pease ESCROW CO. Pioneer Title Insurance Co. OFFICER Jean Egberg
Langley Park, Md.
7635 Newhampshire

INTERVIEW REGISTER

Date		Relocation Worker
1/15/71	Flyer delivered by Wilson Smith. Receptive. Survey: would not talk to PDC representative. Referred Mrs. Warren as a sister (elderly widow)	CD
5/11/71	Mrs. Faulkner called office about moving to Washington, D.C.. Stated that she did not accept offer and would get a lawyer. I advised her to call Mr. Nelson at C-Cap and arrange for legal aide. She was not sure of the procedure of the real estate and relocation.	
5/19/71	8:00 A.M. Mrs. Faulkner came into the office for additional information. We discussed moving to Washington D.C., 235 Housing and housing in Washington D.C.	
5/25/71	Went over things I had discussed with Mrs. Faulkner. She is not sure she wants 235 housing. Wants me to get in touch with LPA (D.C.) to see if we can work out something. She works days 8 - 5. Meeting was at the EDPA office with Barnes and Warren present. They also had a pre-after confab with her.	
8/9/71	Call to Katie Woods. She said that they had lost the house at 8420 New Hampshire, But that she would look again and call us back in a day or so.	
8/27/71	H. Hand has delivered the earnest money and other necessary papers to Legal Aid. Mrs. Faulkner is to go to Legal Aid on 8/20/71 to sign the necessary papers.	
10/19/7	Mrs. Faulkner calls daily since October 1, 1971	
10-19-7	6:00 pm - Visited Mrs. Faulkner to have her sign RHP claim and Moving expense claims. Discussed her moving estimate from Bekins - asked her to go to another. Bekins estimate was \$786.55. She is interested in knowing when she can move.	JC

MEMORANDUM

Date August 5, 1971

TO: The File
FROM: Ben C. Webb
SUBJECT: Fannie Mae Faulkner - 327 N. Fargo

Client has indicated that she wishes to relocate in Washington, D.C. On this date a meeting was held with the client; Jim Barnes of Legal Aid; Ollie Norville, PDC attorney; and Ben Webb, PDC staff, to discuss the problems involved.

There are no problems involved with the acquisition of her property; however, she wishes to purchase her replacement dwelling in Washington, D.C. through her sister, Mrs. Katie Woods, before she has ever been to Washington or seen the property. Mrs. Woods has located a property in Langley Park, Maryland. We have had a telephone conversation with Mrs. Woods and the real estate broker, Mr. C. E. Pease, also of Langley Park. The result of our conversation has been transmitted to Mr. Harold Hand of the Real Estate Department, who has written his letter of August 13, 1971 to H. T. Peck, Inc., for the attention of Mr. Pease. We have also discussed with Mrs. Faulkner the information received from Mrs. Woods, and Mrs. Faulkner has had her own conversation with Mrs. Woods.

We are a little apprehensive about how this is all going to work out; however, there appears to have been a meeting of the minds of all concerned, and under instruction from Mrs. Faulkner we are going to proceed. The only remaining question is whether or not we can pay her actual moving expenses to Washington, D.C. We have discussed this with Miss Helen Benjamin, HUD Area Relocation Representative, and she has promised to investigate and advise.

BCW:ch

November 29, 1971

Pioneer National Title Insurance Co.
421 S. W. Stark Street
Portland, Oregon 97204

ATTENTION: Jean Egberg
Escrow Officer

Re: Escrow No. 386675
FAULKNER, Fannie Mae

Gentlemen:

You have in the above-identified escrow account a \$14,940 Replacement Housing Payment in accordance with our instructions of November 2, 1971.

This is to certify that Mrs. Faulkner has acquired and moved into a standard structure located at 6609 Cockerill Avenue, Takoma Park, Maryland. You are hereby authorized to release the replacement housing payment and disburse it in such manner as directed by Mrs. Faulkner.

Yours very truly,

John B. Kenward
Executive Director

JBK:dl

November 2, 1971

Pioneer National Title Insurance Co.
421 S. W. Stark Street
Portland, Oregon 97204

ATTENTION: Jean Egberg
Escrow Officer

Re: Escrow No. 386675
FAULKNER, Fannie Mae

Gentlemen:

Enclosed is Warrant No. 119 EH in the amount of \$14,940 representing a replacement housing payment, to be deposited to subject escrow for disbursement to Mrs. Faulkner upon written authorization by the Commission that she has purchased and does occupy standard housing.

Sincerely,

Harold D. Hand
Chief, Real Estate

HDH:d1
Enclosure (1)

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 119 EH

DATE October 29, 1971

PAY TO **Pioneer Title Insurance Company**

\$ 14,940.00

DOLLARS

TO THE TREASURER OF THE
 CITY OF PORTLAND, OREGON

AUTHORIZED SIGNATURE
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Deposit in escrow for Fannie Mae Faulkner, Replacement Housing Payment per Claim filed. 327 N. Fargo, (Parcel R-8-9)	\$14,940.00

Account Distribution

NO.	TITLE	AMOUNT
E 1501	Relocation Payments (RHP)	\$14,940.00

*To: O.L. (per option)
 11-2-71 PM.*

AL

BO

(For Local Agency Use Only) DETERMINATION OF ELIGIBILITY FOR REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS	NAME AND ADDRESS OF CLAIMANT FAULKNER, Fannie Mae NAME OF LOCAL AGENCY Portland Development Commission
INSTRUCTIONS: Complete this form to determine eligibility of claimant for Replacement Housing Payment for Homeowners. Attach the completed form to the pertinent claim form filed by claimant. Note that the determination of the amount of payment to cover costs incidental to purchase of a replacement dwelling is made on the applicable claim form. Attach an explanation of any entries which differ from claimant's entries on claim form.	
1. Did the claimant own the dwelling at the time of acquisition? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial Date of Ownership: <u>4/16/59</u> Date of Acquisition: <u>10/6/71</u> <small>Month-Day-Year Month-Day-Year</small>	
2. Did the claimant own and occupy the dwelling at least 180 days prior to the initiation of negotiations? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Initial Date of Ownership: <u>4/16/59</u> Date of Initiation of Negotiations: <u>8/31/71</u> <small>Month-Day-Year Month-Day-Year</small>	
3. Did the claimant purchase and occupy the replacement housing within one year from the date of displacement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date of Displacement: _____ Date of Purchase of Replacement Housing: _____ <small>Month-Day-Year Month-Day-Year</small> Date of Occupancy of Replacement Housing: _____ <small>Month-Day-Year</small> (If the claimant was unable to occupy the replacement housing within the required one-year period, use reverse side of this form to provide explanation.)	
4. Did the claimant have a bona fide mortgage on his dwelling for at least 180 days prior to initiation of negotiations? <input type="checkbox"/> Yes <input type="checkbox"/> No Insurance Date of Mortgage: _____ Date of Discharge of Mortgage: _____ <small>Month-Day-Year Month-Day-Year</small> Date of Initiation of Negotiations: _____ <small>Month-Day-Year</small>	
5. Has the replacement housing been inspected and found to be standard? (Attach copy of dwelling inspection record or, if the claimant moved outside the locality, attach the report obtained from the claimant.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. CERTIFICATION OF LOCAL AGENCY This is to certify that the property purchased by the claimant has been inspected and the property was occupied by the claimant within one year following his displacement. I further certify that I have examined this claim and have found it to be in accord with the applicable provisions of Federal Law and the regulations issued by the Department of Housing and Urban Development pursuant thereto. Therefore, this claim is hereby approved and payment in the amount of \$ <u>14,940.00</u> is authorized. <u>10-28-71</u> Date <u>[Signature]</u> Authorized Signature	
7. RECORD OF PAYMENT Date of payment: <u>10/29/71</u> Check number: <u>119EH</u> Amount: \$ <u>14,940.00</u>	

CLAIM FOR REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS		PROJECT NAME (if applicable) Emanuel Project
NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY Portland Development Commission 1700 S. W. Fourth, Portland, Oregon 97201		PROJECT NUMBER ORE R-20
INSTRUCTIONS: Complete all applicable items and sign certification in Block 4. Consult the displacing agency as to whether you need a Claimant's Report of Self-Inspection of Replacement Dwelling to complete and submit with this claim.		
PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies . . . or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."		
1. FULL NAME OF OWNER-OCCUPANT CLAIMANT (as shown in deed to displacing agency or in condemnation proceeding) FAULKNER, Fannie Mae (i)		2. DATE OF DISPLACEMENT X
3. INFORMATION IN SUPPORT OF CLAIM		
A. Differential Payment		PARCEL: R-8-9
Part I. Data on dwelling unit from which you moved		
1. Address of dwelling unit from which you moved <u>327 N. Fargo, Portland, Oregon 97227</u>		
2. Date you first occupied this dwelling as the owner <u>4-16-59</u> Month-Day-Year		
3. Number of bedrooms in the dwelling <u>4</u>		
4. Date of initiation of negotiations for local agency acquisition of dwelling Month-Day-Year		
5. Payment made by local agency for the dwelling \$ <u>7,000.00</u>		
Part II. Data on dwelling unit to which you moved		
6. Address of dwelling unit to which you moved (include ZIP Code) <u>6609 Cockerille Avenue, Takoma Park, Maryland 20783</u>		
7. Number of bedrooms in replacement dwelling <u>3</u>		
8. Purchase price of the replacement dwelling \$ <u>22,500.00</u>		

[form continued on next page]

C. Incidental Expenses (List incidental expenses incurred by you in connection with the purchase of replacement dwelling. If more space is necessary, use additional sheets.)

Item (a)	COSTS INCURRED BY CLAIMANT			FOR LOCAL AGENCY USE
	Charged to Claimant on Closing Statement (b)	Paid Directly by Claimant (c)	Amount Claimed (Col. (b) + (c)) (d)	Amount Approved (e)
	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

Listing of documents submitted herewith in support of amounts entered in Column (d) above:

4. I submit this information in support of a claim for a Replacement Housing Payment under Section 203 of P.L. 91-646, as amended, and I certify under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that the information submitted herewith has been examined by me and is true, correct, and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, falsification of any item submitted herewith may result in forfeiture of the entire claim.

_____ Date

x Fannie Mae Faulkner
Signature of Owner-Occupant(s)

9. Complete either a or b:

a. If you have purchased and occupy the replacement dwelling:

Date you signed purchase agreement _____ Date of settlement _____
Month-Day-Year Month-Day-Year

b. If you have purchased but do not yet occupy the replacement dwelling:

Date you signed purchase contract 9/14/71 Date of settlement _____
Month-Day-Year Month-Day-Year

Date you expect to occupy _____
Month-Day-Year

10. Check method you choose to determine the replacement housing cost that will be used as a basis for computing the amount of the differential payment

Schedule Comparative

B. Interest Payment

- 1. Outstanding balance of mortgage (if any) on dwelling from which you moved \$ _____
- 2. Number of monthly payments remaining on the mortgage _____
- 3. Annual interest rate of mortgage on the dwelling from which you moved _____ %
- 4. Annual interest rate of mortgage on the replacement dwelling _____ %
- 5. Prevailing annual interest rate paid on standard passbook savings accounts by savings banks in the community where the replacement dwelling is located _____ %

[form continued on next page]

APPENDIX 8. GUIDEFORM WORKSHEET FOR COMPUTATION OF REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS

<p>(For Local Agency Use Only)</p> <p>WORKSHEET FOR COMPUTATION OF REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS</p>	<p>NAME AND ADDRESS OF CLAIMANT</p> <p>FAULKNER, Fannie Mae</p> <p>COMPUTATION PREPARED BY:</p> <p><u>Crolley, James</u> <u>10/19/71</u></p> <p style="text-align: center;">(Name) (Date)</p>
<p>INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved. Complete Blocks B and C; then complete Block A.</p>	
<p>A. COMPUTATION OF TOTAL REPLACEMENT HOUSING PAYMENT FOR HOMEOWNERS</p>	
<p>1. Amount of differential payment (Block B, Line 6)</p> <p>2. Plus interest payment (Block C, Step 4, Last line)</p> <p>3. Plus costs incidental to purchase (Total amount approved by agency, from claim form, Block 3C, Column (e))</p> <p>4. Total (Sum of Lines 1, 2, and 3)</p> <p>5. Minus adjustments (Attach explanation; e.g., amount previously received as Replacement Housing Payment for Tenants and Certain Others)</p> <p>6. Total Replacement Housing Payment for Homeowner (Line 4 minus Line 5)</p> <p>(Enter this amount in the space provided in Block 6 on the Guideform Determination of Eligibility for Replacement Housing Payment for Homeowners)</p>	<p>\$ <u>14,940.00</u></p> <p>+ \$ _____</p> <p>+ \$ _____</p> <p>\$ _____</p> <p>- \$ _____</p> <p>\$ <u>14,940.00</u></p>
<p>B. COMPUTATION OF DIFFERENTIAL PAYMENT</p>	
<p><u>Required Information</u></p>	
<p>1. Actual purchase price of replacement dwelling</p> <p>2. Cost of comparable replacement dwelling (Cost based on: <input checked="" type="checkbox"/> Schedule <input type="checkbox"/> Comparative <input type="checkbox"/> Other)</p> <p>3. Acquisition payment made by agency for claimant's former dwelling</p>	<p>\$ <u>22,500.00</u></p> <p>\$ <u>21,940.00</u></p> <p>\$ <u>7,000.00</u></p>
<p><u>Computation</u></p>	
<p>4. Line 1 or Line 2, whichever is less</p> <p>5. Minus Line 3</p> <p>6. Amount of differential payment</p>	<p>\$ <u>21,940.00</u></p> <p>- \$ <u>7,000.00</u></p> <p>\$ <u>14,940.00</u></p>

[form continued on next page]

MEMO TO FILE - Fannie Mae Faulkner

FROM: W.S. Jones

28 October, 1971

Pushing the idea of the comparable method of determining an RHP, in this case, seems somewhat invalid. The maximum additional amount that would be gained is \$60.00. Mrs. Faulkner is satisfied with the amount as determined by comparable.

It was difficult to find comparables over the schedule amount - 2 of the offerings weren't really comparable since they exceed the subject house on number of rooms. A third might have been okay as listed in MLS on October 6 for \$23,500.00, but it was relisted in MLS on October 22nd for \$21,500.00 and has not sold at that price.

I think since everyone is satisfied that schedule amount is fair, that we should proceed with processing this claim.

Note: cannot compute by comparable if replacement dwelling is outside of 50 mile radius of area of jurisdiction. Therefore - it is correct to compute by schedule.

RESIDENTIAL ADDITIVE DETERMINATION

File No. _____

Sale Rental

Owner Fuckner, Fannie Address 327 N Fargo Occupant

Tenant _____ Address _____ Occupant

ITEM	SUBJECT	OFFERING #1			OFFERING #2			OFFERING #3		
		BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
Address	327 N. Fargo	4070 N C 22nd	510 N E 76th	1012 N E Pacific						
No. of Rooms	4 1 7	4 2 9	4 1 8	4 1 7						
Type	Single Fam	Single Fam	Single Fam	Single Family						
State of Int. Repair	FAIR	Good	Good	Good						
Type of Neighborhood	Poor	V. Good	Good	Good						
Street Improvements	YES	YES	YES	YES						
Condition of Structure	Good	Good	Good	Good						
Lot Area	40 x 108	100 x 45	75 x 150	67 x 143						
Year Built	1905	1929		1938						
Fireplace	YES	YES		YES						
Water Supply	OIL	OIL	OIL	OIL						
Foundation	FCB	FCB	FCB	FCB						
Condition	YES (3rd)	damaged	damaged	Single						
Lot Area	964 + 2 nd story			912 + 2 nd story						
Foundation										
Condition of Structure										
Taxes	160.00	441.00	164.2							

Continue on next page

City of Takoma Park, Maryland
Code Enforcement Division
585-4255

September 1, 1971

Hugh T. Peck Realty
c/o Harry T. Umstot
7635 New Hampshire Avenue
Langley Park, Maryland 20783

Re: 6609 Cockerille Avenue
Registration # N. A.

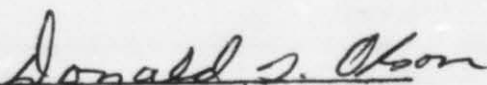
Dear Mr. Umstot:

This officer recently visited the above premises conducting an interior-exterior inspection and found no violations of the Takoma Park Housing Codes.

As you know, the purpose of the Housing Code is to ensure safe and healthy living conditions in houses and neighborhoods. The minimum requirements for maintenance, basic housing facilities and occupancy standards are intended to prevent deterioration of dwellings and communities. By working together for better housing and better communities, we can all help to make Takoma Park a better place in which to live.

Thank you for your cooperation. Congratulations for the pride and care you have evidenced in the maintenance of your home. The example you have set will encourage others in your community to maintain higher housing standards, with resulting benefits to all.

Very truly yours,


Code Enforcement Officer
Donald L. Olson

HUGH T. PECK, Inc., REALTORS



8821 ANNAPOLIS RD. LANHAM, MD.
9515 BALTIMORE AVE. COLLEGE PARK, MD.
7902 OLD GEORGETOWN RD. BETHESDA, MD.

9822 FALLS ROAD POTOMAC, MD.
207 GORMAN AVE. LAUREL, MD.

11246 GEORGIA AVE. WHEATON, MD.
12842 NEW HAMPSHIRE AVE. SILVER SPRING, MD.
7635 NEW HAMPSHIRE AVE. LANGLEY PARK, MD.



1. RECEIVED FROM a deposit of Dollars (\$) in the form of to be applied as part payment of the purchase of Lot in Block, Subdivision

County, Md., with improvements thereon (including heating, air conditioning, plumbing and lighting fixtures, range, refrigerator, dishwasher, disposer, cornices, curtain and drapery rods, awnings, screens, storm doors and windows, venetian blinds, shades, all trees, shrubs and plants, as now installed on the premises) known as (address) upon the following terms of sale:

Total Price of Property Dollars (\$) The Purchaser agrees to pay Dollars (\$)

2. FIRST TRUST. The Purchaser is to a first deed of trust secured on said premises of \$ due and bearing interest at the rate of per cent per annum, payable Dollars (\$) per month, plus one-twelfth of annual taxes and insurance, if required by lender.

3. SECOND TRUST. The balance of deferred purchase money amounting to \$ is to be secured by a deed of trust on said premises to be paid in monthly installments of \$ or more, at maker's option including interest at the rate of per cent per annum, each installment when so paid to be applied, first, to the payment of interest on the amount of principal remaining and the balance thereof credited to principal, which deed of trust the Seller agrees to accept as a part of the purchase price.

4. TITLE. The property, including the aforesaid chattels, is sold free of encumbrance except as stated herein. Title is to be good and merchantable, subject, however, to covenants, conditions and restrictions of record, if any; otherwise the deposit is to be returned and sale declared off at the option of the Purchaser, unless the defects are of such character that they may be remedied by legal action within a reasonable time, but the Seller and Agent are hereby expressly released from all liability for damages by reason of any defect in the title.

5. COSTS. Property is to be conveyed in the name of and Purchaser hereby authorizes the undersigned Agent(s) to order the examination of title and the preparation of all necessary conveyancing papers through Attorney, and agrees to pay the settlement charges in connection therewith, tax certificate, transfer taxes, conveyancing, notary fees, survey where required, State revenue stamps, if any, and all recording charges, except those incident to clearing existing encumbrances including those for any purchase money trust; provided, however, that if upon examination the title should be found defective and it is not remedied as aforesaid, the Seller hereby agrees to pay any above-mentioned costs incurred.

6. SETTLEMENT. Within days from date of acceptance hereof by the Seller, or as soon thereafter as a report of the title can be secured if promptly ordered, and/or survey, if required, and/or Government-insured loan, if used, can be processed, if promptly applied for, the Seller and Purchaser are required and agree to make full settlement in accordance with the terms hereof.

7. PERFORMANCE. Settlement is to be made at the office of the Attorney, or the Title Company searching the title. Deposit with the Attorney or with the Title Company, of the cash payment as aforesaid, the deed of conveyance for execution and such other papers as are required of either party by the terms of this contract shall be considered good and sufficient tender of performance of the terms hereof.

8. ADJUSTMENTS. Rents, taxes, water rent, insurance and interest on existing encumbrances, if any, and operating charges are to be adjusted to date of transfer. Taxes, general and special, are to be adjusted according to the certificate of taxes issued by the collector of taxes, if any, except that assessments for improvements completed prior to the date hereof, whether assessment therefor has been levied or not, shall be paid by the seller or allowance made therefor at time of transfer.

9. CONVEYANCE. Seller agrees to execute and deliver a good and sufficient special warranty deed.

10. INSURANCE. The risk of loss or damage to said property by fire or other casualty until the deed of conveyance is recorded is assumed by the Seller.

11. CONVENTIONAL LOAN. This contract is contingent on the ability of the Purchaser to secure a firm commitment for the herein described financing within days from date of ratification of this contract which commitment the Purchaser agrees to pursue diligently.

12. FHA INSURED LOAN. The provisions of this paragraph apply only when the Purchaser is buying with an FHA insured loan. It is expressly agreed that, notwithstanding any other provisions of this contract, the Purchaser shall not be obligated to complete the purchase of the property described herein or to incur any penalty by forfeiture of earnest money deposits or otherwise unless the Seller has delivered to the Purchaser a written statement issued by the Federal Housing Commissioner setting forth the appraised value of the property for mortgage insurance purposes of not less than \$, which statement the Seller hereby agrees to deliver to the Purchaser promptly after such appraised value statement is made available to the Seller.

13. VETERANS ADMINISTRATION GUARANTEED LOAN. In the event that the Purchaser is a Veteran and is placing a Veterans Administration guaranteed loan, it is expressly agreed that, notwithstanding any other provisions of this contract, the Purchaser shall not incur any penalty by forfeiture of earnest money or otherwise or be obligated to complete the purchase of the property described herein, if the contract purchase price or cost exceeds the reasonable value of the property established by the Veterans Administration or the Purchaser is not approved by the Veterans Administration and the lending institution.

14. Purchaser utilizing FHA insured or VA guaranteed loan agrees to make application immediately and file all necessary papers that are required to complete processing and agrees that failure so to do shall give the Seller the right to declare the deposit forfeited. Seller agrees to comply with FHA or VA requirements, where applicable.

15. If a new FHA or VA loan is to be placed under this contract, the Purchaser agrees to pay a loan placement fee of 1% of the principal sum of the loan, and the Seller agrees to pay a loan placement fee of % of said loan. These loan placement fees are based on the present mortgage money market and it is further agreed that the Seller will comply with any reasonable change in said loan placement fee at the time of settlement provided said change is due to a change in the mortgage money market.

16. POSSESSION. Seller agrees to give possession and occupancy at time of settlement, and in the event he shall fail so to do he shall become and be thereafter a tenant by sufferance of the Purchaser and hereby waives all notice to quit, as provided by the laws effective in the State of Maryland. Seller will leave premises free and clear of trash and debris and broom clean, and the mechanical equipment in operating condition.

17. All notices of violations of orders or requirements noted or issued by any county or local authority, or actions in any court on account thereof, against or affecting the property at the date of settlement of this contract, shall be complied with by the Seller, and the property conveyed free thereof.

18. SUBDIVISION PLAT. The Purchaser hereby waives the receipt of an entire copy of the single recorded subdivision plat but, prior to or at the time of settlement, shall be provided with a copy of said subdivision plat, where required. If the property sold herein is an unimproved lot or a new dwelling, the Purchaser acknowledges receipt of said subdivision plat prior to execution of the contract.

19. AGENCY. The Seller recognizes HUGH T. PECK, INC., REALTORS as the Agent(s) negotiating this contract and agrees to pay a brokerage fee for services rendered amounting to % of sales price and the party making settlement is hereby authorized and directed to deduct the aforesaid brokerage fee from the proceeds of the sale and pay same to Agent(s). The entire deposit shall be held by the Agent(s) in an escrow account in accordance with the real estate license law.

20. Special provisions on the reverse side hereof, or in attached addendum, bearing the signatures of all parties concerned, are hereby made a part of this contract. ADDENDUM ATTACHED YES NO

21. If the property involved in this contract is located in a jurisdiction other than Montgomery County, Maryland, wherever any reference is made to Montgomery County, Maryland, or any official thereof, the name of the jurisdiction in which property is located and the proper official thereof is substituted automatically.

22. The Agent(s) hereby agrees to the within brokerage fee provisions and acknowledges receipt of the above deposit but assumes no responsibility for the condition of the property or for the performance of this contract by any or all parties hereto.

HUGH T. PECK, INC., REALTORS By Salesman Broker or Sales Manager

23. The principals to this contract mutually agree that it shall be binding upon them, their and each of their respective heirs, executors, administrators, successors and assigns; that the provisions hereof shall survive the execution and delivery of the deed aforesaid and shall not be merged therein; that this contract contains the final and entire agreement between the parties hereto, and neither they nor their agents shall be bound by any terms, conditions, statements, warranties or representations, oral or written not herein contained.

24. We, the undersigned, hereby ratify, accept and agree to the above memorandum of sale and acknowledge it to be our contract. This contract has been executed in copies.

Seller Purchaser

Seller Purchaser

Date of Acceptance 19 (Address of Purchaser) (Phone)

9822 FALLS
 POTOMAC, MD.
 207 GORMAN AVE.
 LAUREL, MD.

ADDENDUM

Provisions attached to and hereby made a part thereof, the contract dated Sept 19, 71
 for Block 11 Subdivision Grove and Lomacks Ass. to Takoma
 located at 6809 Rockville Ave., Takoma Park, Maryland Prince
 and (Sellers) High T. Peck, Inc. Montgomery

The purchase of second deed of trust is to secure note for \$10,000.00 until
 completion, which is held in escrow with Pioneer National Title Insurance
 Company, 421 S.W. Stark Street, Portland, Oregon, escrow officer Mrs. Jean
 with instructions contained in letter dated August 13, 1971 from Portland
 Development Commission, 1700 S.W. Fourth Ave., Portland, Oregon, signed by
 Mr. Harold D. Reno, Real Estate Supervisor, copy of which is made a part
 of this contract.

*From the Office of the
 Recorder*

Sept 19, 71
 Date

2/11/71
 Date

Seller



HUGH T. PECK, Inc., REALTOR

8821 ANNAPOLIS RD.
LANHAM, MD.
9515 BALTIMORE AVE.
COLLEGE PARK, MD.
7902 OLD GEORGETOWN RD.
BETHESDA, MD.

9822 FALLS ROAD
POTOMAC, MD.
207 GORMAN AVE.
LAUREL, MD.

11246 GEORGIA AVE.
WHEATON, MD.
12842 NEW HAMPSHIRE AVE.
SILVER SPRING, MD.
7635 NEW HAMPSHIRE AVE.
LANGLEY PARK, MD.



ADDENDUM

Special Provisions attached to and hereby made a part thereof, the contract dated September 14, 1971
Pt 10, 11, 12
on Lot & 20 Block 11 Subdivision Gibbs and Dosacks Add. to Tahoma Park
located at 6609 Cokerille Ave., Takoma Park, Maryland Prince Georges
Montgomery County, Maryland
between (Purchasers) Fannie Mae Faulkner
and (Sellers) Hugh T. Peck, Inc.

The purpose of second deed of trust is to secure note for \$14,500.00 until this amount, which is held in escrow with Pioneer National Title Insurance Company, 421 S.W. Stark Street, Portland, Oregon, escrow officer Mrs. Jean Egberg, can be disbursed to E. F. Blanchard, Title attorney, in accordance with instructions contained in letter dated August 13, 1971 from Portland Development Commission, 1700 S.W. Fourth Ave., Portland, Oregon, signed by Mr. Harold D. Hand, Real Estate Supervisor, copy of which is made a part of this contract.

Sept 19, 71
Date

Fannie Mae Faulkner
Purchaser

9/14/71
Date

Hugh T. Peck, Inc.
Seller



HUGH T. PECK, Inc. REALTORS

CONFESSED JUDGMENT NOTE

\$ 4,800.00 Langley Park, Maryland
Eighteen Days after date I September 14 197 1
promise to pay to the order of
Hugh T. Peck, Inc., 7635 New Hampshire Ave., Langley Park, Maryland
Four Thousand Eight Hundred and no/100 ----- Dollars
with interest at 8 per cent per annum after October 2, 1972 until paid.

The makers, endorsers, guarantors and sureties hereby waive presentment for payment, demand, protest and notice of protest and non-payment, and jointly and severally authorize, irrevocably, any attorney of record to confess a judgment, without process, in favor of the holder of this note, at any time after maturity, for the amount of principal and interest due hereunder, together with costs of suit and attorneys fees of fifteen per cent (15%) on said amount so confessed, and hereby waive all exemptions to the extent permitted by law.

Address 327 North Fargo,

Address Portland, Oregon.

Fannie Mae Faulkner (Seal)

Due October 1 197 1 (Seal)

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

Nº 27865 G

DATE November 16, 19 71

PAY TO THE
 ORDER OF

United Air Lines

\$ 179.00

DOLLARS

NON-NEGOTIABLE

THE FIRST NATIONAL BANK OF OREGON
 S.W. Fifth and College Branch
 Portland, Oregon

Portland Development Commission 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Ticket for Fannie Mae Faulkner to Baltimore, Md. - Per claim for relocation - 327 N Fargo (R-8-9) to Takoma Park, Md.	\$179.00

Account Distribution

NO.	TITLE	AMOUNT
E1501	Relo Payment (Moving - Ind.)	\$179.00

check delivered to United via Benn Mrs. Faulkner

AL

BS

CLAIM FOR RELOCATION PAYMENT FOR ACTUAL MOVING
EXPENSES (FAMILIES AND INDIVIDUALS)

NAME, ADDRESS, AND ZIP CODE OF LOCAL AGENCY	PROJECT NAME (if applicable)
Portland Development Commission 1700 S. W. Fourth Avenue Portland, Oregon 97201	Emanuel Project
	PROJECT NO. ORE R-20

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies . . . or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

1. FULL NAME OF CLAIMANT FAULKNER, Fannie Mae (i)

2. DATE(S) OF MOVE November 20, 1971

3. DWELLING FROM WHICH YOU MOVED PARCEL NO. R-8-9

a. Address <u>327 N. Fargo</u> <u>Portland, Oregon 97227</u>	d. Number of rooms occupied (excluding bathrooms, hallways, and closets): <u>8</u>
b. Apartment, Floor, or Room Number <u>---</u>	e. Date you moved into this address: <u>4-16-71</u>
c. Was it furnished with your own furniture? <u> x </u> Yes <u> </u> No	

4. DWELLING UNIT TO WHICH YOU MOVED:

a. Address (include ZIP Code) <u>6609 Cockerville</u> <u>Avenue, Takoma Park, Md. 20783</u>	c. Were household goods moved to or from storage? <u> </u> Yes <u> x </u> No If "Yes", complete table, "Statement of Claim for Storage Costs"
b. Apartment, Floor, or Room Number <u>----</u>	

5. TOTAL CLAIM
(If claim is for reimbursement of actual moving expenses and/or storage costs, enter sum of Lines 10a, 10b, and 10c below.)
\$ 179.00

6. NAME OF MOVING COMPANY (OR PERSON) UNITED AIR LINES	7. MOVER'S TELEPHONE NUMBER 226-7211	8. ADDRESS OF MOVING COMPANY (OR PERSON) 640 S. W. Broadway Portland, Oregon 97205
---	---	--

9. METHOD OF PAYMENT, MOVING BILL (Check one)

- a. I have paid the moving charges, as evidenced by the attached itemized or paid bill from the mover, and/or other contractors, and I therefore request reimbursement.
- b. I have not paid the moving charges, and I therefore request that the attached itemized moving bill be paid directly to the mover, and/or other contractors, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.
- c. I hereby request and authorize that the moving charges, to be incurred by me, be paid directly to the mover and/or other contractors, in accordance with the arrangements made at this time, and with my consent, between the local agency and/or other contractors.

11/15/71

Date

Fannie Mae Faulkner
Signature of Claimant

10. AMOUNT OF ACTUAL COSTS

- a. MOVING COST (Must be supported by attached receipt(s) or unpaid voucher from mover if local agency is to pay mover directly.) *Initial Claims - Cost of airline ticket* \$ 179.00
- payable under HUD Transmittal 1371.1, Chapter 6, Sec. 1, 8.a.
- b. COST OF INSURANCE COVERING MOVE AND/OR STORAGE (Must be supported by invoice, receipt, or similar evidence of payment.) \$ _____
- c. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.) \$ _____

11. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that this claim and information submitted herewith have been examined by me and are true, correct and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, falsification of any item in this claim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted any other claim for, or received, reimbursement or compensation from any other source for any item of loss or expense paid pursuant to this claim, and that any bills or receipts submitted herewith accurately reflect moving services actually performed and/or storage costs actually incurred.

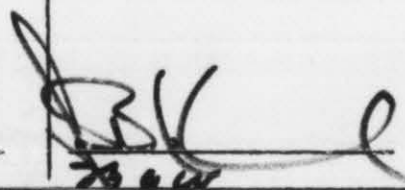
11/15/71

Date

Fannie Mae Faulkner
Signature of Claimant

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount ^{1/}	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ _____			
2. Dislocation allowance \$ _____			
3. Total \$ _____	_____	_____	_____
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____	_____	_____	_____
	179.00	_____	_____
2. Supplementary payment (s) for storage costs:	_____	_____	_____
3. Final payment for moving expenses covering storage and related costs	_____		11-16-71

^{1/} Attach full explanation of any adjustments made; e.g., amount set off against claim or amount of dislocation allowance made as an advance payment.

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
11/16/71	278656	\$ 179. ⁰⁰ PD			\$

January 26, 1972

United Van Lines, Inc.
No. 1 United Drive
Fenton, Missouri 63026

Re: Invoice No. 559 00313 I
Fannie Mae Faulkner

Gentlemen:

Enclosed you will find our Warrant No. 262 EH in the amount of \$1,385.70.

This is to cover your charges for moving the household goods of Mrs. Fannie Mae Faulkner from 327 N. Fargo Street, Portland, Oregon to Takoma Park, Maryland.

Very truly yours,

W. Stanley Jones
Relocation Supervisor
Emanuel Hospital Project

WSJ:ch
Enclosure

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 262 EH

DATE January 26, 1972

PAY TO **United Van Lines, Inc.**

\$ **1,385.70**

DOLLARS

TO THE TREASURER OF THE
 CITY OF PORTLAND, OREGON

AUTHORIZED SIGNATURE
NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reimbursement for Relocation Payment for final move of Fannie Mae Faulkner per claim filed. From 327 N. Faego- (Parcel R-8-9). Lump Sum Payment	<u>\$1,385.70</u>

Account Distribution

NO.	TITLE	AMOUNT
E 1501	Relocation Payment (EH) (Moving - Individual)	\$1,385.70

AC

JMM

CLAIM FOR RELOCATION PAYMENT FOR ACTUAL MOVING
EXPENSES (FAMILIES AND INDIVIDUALS)

NAME, ADDRESS, AND ZIP CODE OF LOCAL AGENCY

Portland Development Commission
1700 S. W. Fourth Avenue
Portland, Oregon 97201

PROJECT NAME (if applicable)

EMANUEL PROJECT

PROJECT NO. ORE R-20

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001, provides:
"Whoever, in any matter within the jurisdiction of any department or agency of the
United States knowingly and willfully falsifies. . . or makes any false writing or
document knowing the same to contain any false, fictitious or fraudulent statement or
entry, shall be fined not more than \$10,000 or imprisoned not more than five years,
or both."

1. FULL NAME OF CLAIMANT

FAULKNER, Fannie Mae

(i)

2. DATE(S) OF MOVE

November 20, 1971

3. DWELLING FROM WHICH YOU MOVED

PARCEL NO.

R-8-9

a. Address 327 N. Fargo

Portland, Oregon 97227

b. Apartment, Floor, or Room Number ---

c. Was it furnished with your own furniture?

Yes No

d. Number of rooms occupied (ex-
cluding bathrooms, hallways,
and closets): 8

e. Date you moved into this
address: 4-16-71

4. DWELLING UNIT TO WHICH YOU MOVED:

a. Address (include ZIP Code) 6609 Cockerville

Avenue, Takoma Park, Md. 20783

b. Apartment, Floor, or Room Number ---

c. Were household goods moved to
or from storage?

Yes No

If "Yes", complete table,
"Statement of Claim for Storage
Costs"

5. TOTAL CLAIM

(If claim is for reimbursement of actual moving expenses and/or storage costs,
enter sum of Lines 10a, 10b, and 10c below.)

\$ 1,385.70

6. NAME OF MOVING COMPANY (OR PERSON)

Fulton Moving & Storage, Inc.
(United Van Lines)

7. MOVER'S TELEPHONE
NUMBER

235-6677

8. ADDRESS OF MOVING
COMPANY (OR PERSON)

401 S. E. 8th Avenue
Portland, Oregon

9. METHOD OF PAYMENT, MOVING BILL (Check one)

- a. I have paid the moving charges, as evidenced by the attached itemized or paid bill from the mover, and/or other contractors, and I therefore request reimbursement.
- b. I have not paid the moving charges, and I therefore request that the attached itemized moving bill be paid directly to the mover, and/or other contractors, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.
- c. I hereby request and authorize that the moving charges, to be incurred by me, be paid directly to the mover and/or other contractors, in accordance with the arrangements made at this time, and with my consent, between the local agency and/or other contractors.

11/15/71

Date

Jamie Mae Faulkner

Signature of Claimant

10. AMOUNT OF ACTUAL COSTS (FINAL CLAIM)

- a. MOVING COST (Must be supported by attached receipt(s) or unpaid voucher from mover if local agency is to pay mover directly.) \$ 1,356.70
- b. COST OF INSURANCE COVERING MOVE AND/OR STORAGE (Must be supported by invoice, receipt, or similar evidence of payment.) \$ 29.00
- c. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.) \$ _____

11. I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that this claim and information submitted herewith have been examined by me and are true, correct and complete, and that I understand that, apart from the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, falsification of any item in this claim or submitted herewith may result in forfeiture of the entire claim. I further certify that I have not submitted any other claim for, or received, reimbursement or compensation from any other source for any item of loss or expense paid pursuant to this claim, and that any bills or receipts submitted herewith accurately reflect moving services actually performed and/or storage costs actually incurred.

11/15/71

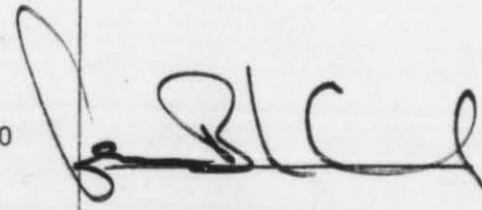
Date

Jamie Mae Faulkner

Signature of Claimant

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount <u>1/</u>	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ _____			
2. Dislocation allowance \$ _____			
3. Total \$ _____	_____	_____	_____
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____			
2. Supplementary payment(s) for storage costs:			
3. Final payment for moving expenses covering storage and related costs	1,385.70		1-25-72

1/ Attach full explanation of any adjustments made; e.g., amount set off against claim or amount of dislocation allowance made as an advance payment.

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
11/16/71	27865 G	\$ 179.00			\$
1/26/72	262 EH	1385.70			

WORKSHEET FOR ALL MOVING CLAIMS

1. Name Faulkner Fannie Mae (1) Project _____
 2. Date(s) of move November Parcel No. R-8-9
 3. Dwelling unit from which you moved:
 Address 327 N. FARGO No. of rooms 3
 Furnished Unfurnished Date you moved into this unit 4-16-59
 4. Dwelling unit to which you moved:
 Address 6609 Oakville Ave. Takoma Park Md 20913
 Were goods moved to or from storage? Yes No

5. Total claim \$ _____

 FIXED PAYMENT: \$200 + \$ _____ = \$ _____

ACTUAL MOVING COSTS

6. Name of moving company (or person) FULTON MOVING (UNITED VAN LINES)
 7. Mover's telephone 235-6677 8. Mover's address 401 S.E. 7th Ave
 9. Method of payment
 a. reimburse client (show paid bill)
 b. pay mover directly (show bill)
 c. let local agency contract with mover

10. Amount actual costs
 a. Moving costs (attach receipt or voucher) \$ 1356.70
 b. Cost of insurance (attach invoice) \$ 29.00 total: 1385.70
 c. Storage cost (attach receipt or voucher) \$ _____

STORAGE COSTS

Name, address and ZIP code of storage company

- A. Type of claim initial supplementary final
 B. Storage period
 1. Total period: _____ months. Check one: Actual Estimated
 2. Date property moved to storage: _____
 3. Date property moved from storage: _____
 C. Storage Costs

1. Monthly rate	\$ _____	Approved	\$ _____
2. Total costs actually incurred	\$ _____		\$ _____
3. Amount previously received	\$ _____		\$ _____
4. Amount claimed (line 2 minus 3)	\$ _____		\$ _____

 D. Description of Property Stored: please list on back of this sheet.
 E. Method of Payment
 reimburse client (attach receipt or paid bill)
 pay storage company directly (attach bill)



United Van Lines Inc.

No. 1 UNITED DRIVE
FENTON, MISSOURI 63026



Name **PORTLAND DEVELOPMENT COMMISSION SITE OFF**
235 N MONROE ST
PORTLAND , ORE 97227

Invoice No. **559 00313 1**

Attn. of **W STANLEY JONES**

Date **12/29/71**

Shipment of Household Goods for **F FAULKNER** From **PORTLAND ORE** To **TAKOMA PK MD** Purchase Order No.

Tariff No.	143A 02	2763	Miles	4640	Lbs. At	22.25	Per Cwt. \$	1,032.40
12EA	DISH-PACK	@		2.00EA				24.00
3EA	CARTONS 1 1/2CU	@		.75EA				2.25
16EA	CARTONS 3 CU FT	@		.75EA				12.00
2EA	CARTONS 6 CU FT	@		.75EA				1.50
2EA	MATTRESS REG	@		1.90EA				3.80
3EA	WARDROBE CARTON	@		5.00EA				15.00
	CONTAINERS TOTAL				58.55			
12EA	DISH-PACK	@		7.25EA				87.00
3EA	CARTONS 1 1/2CU	@		1.75EA				5.25
16EA	CARTONS 3 CU FT	@		2.75EA				44.00
2EA	CARTONS 6 CU FT	@		3.75EA				7.50
2EA	MATTRESS REG	@		1.85EA				3.70
3EA	WARDROBE CARTON	@		2.00EA				6.00
1EA	CRATES MIN	@		5.00EA				5.00
5EA	CRATES CU FT	@		1.50EA				7.50
	PACKING TOTAL				165.95			
12EA	DISH-PACK	@		2.00EA				24.00
3EA	CARTONS 1 1/2CU	@		.50EA				1.50
16EA	CARTONS 3 CU FT	@		.75EA				12.00
2EA	CARTONS 6 CU FT	@		1.00EA				2.00
2EA	MATTRESS REG	@		.75EA				1.50
3EA	WARDROBE CARTON	@		.25EA				.75
1EA	CRATES MIN	@		1.00EA				1.00
5EA	CRATES CU FT	@		.25EA				1.25
	UNPACKING TOTAL				44.00			
5800	VALUATION STAIRS INSIDE	@		.50 C \$				29.00
1.00	HRS. 1MEN EXTRA LABOR	@		9.40 HRS (SORTING)				23.20
4640	# ADDITIONAL TRANSPORT	@		.50 CWT				9.40
								23.20

BY ORDER OF I. C. C. ALL INVOICES MUST BE PAID WITHIN SEVEN (7) DAYS.

1,385.70

CC

0559

1,385.70



United Van Lines

FENTON MISSOURI
PHONE: 314-631-3100

DELIVERING CARRIER (IF ANY)

UNIFORM HOUSEHOLD GOODS BILL OF LADING AND FREIGHT BILL

I.C.C. NO. 6

PLEASE REFER TO THIS NUMBER IN ANY CORRESPONDENCE
ORDER NUMBER

FROM **Portland, Oregon** TO **Takoma Park, Maryland** 559 313 71

SHIPPER **Fannie Faulkner**
COMPANY (ASSOCIATED WITH) **Ex-World Develop Comm**
ORIGIN **Portland, Oregon**
STREET ADDRESS **327 N Fargo**
EXTRA STOP ADDRESS
DATE LOADED **11/16**

CONSIGNEE **Fannie Faulkner**
DESTINATION **Takoma Park, Maryland**
STREET ADDRESS **6609 Cockeysville Ave**
EXTRA STOP ADDRESS
IF DELIVERY ADDRESS OTHER THAN ABOVE

1. C.O.D. CHARGE PREPAID
BILL TO **World Development Commission**
STREET **Site Office - Emanuel Hosp. Project**
CITY **Portland, Oregon**
ATTN: **W. Stanley Jones** MILITARY CODE

SHIPPER: ORIGINAL **REVEIGH**
The tare weight of the vehicle must be entered on this line prior to loading your shipment on the vehicle.
Gross **40980**
Tare **36340 (36340)**
Net **4640**
Min. Wt.

2. THE RULES, REGULATIONS, RATES AND CHARGES SET OUT IN THE TARIFF CURRENTLY IN EFFECT ON THE DAY OF LOADING, AS FILED WITH THE INTERSTATE COMMERCE COMMISSION, SHALL GOVERN THIS SHIPMENT.
3. ALL TERMS WRITTEN, PRINTED, STAMPED OR TYPED ON THE FRONT OR BACK OF THIS FORM ARE AGREED TO BY BOTH PARTIES.
4. UNLESS THE SHIPPER EXPRESSLY RELEASES THE SHIPMENT TO A VALUE OF 60 CENTS PER POUND PER ARTICLE, THE CARRIER'S MAXIMUM LIABILITY FOR LOSS AND DAMAGE SHALL BE EITHER THE LUMP-SUM VALUE DECLARED BY THE SHIPPER OR AN AMOUNT EQUAL TO \$1.25 FOR EACH POUND OF WEIGHT IN THE SHIPMENT, WHICHEVER IS GREATER, THE SHIPMENT WILL MOVE SUBJECT TO THE RULES AND CONDITIONS OF THE CARRIER'S TARIFF.
SHIPPER HEREBY RELEASES THE ENTIRE SHIPMENT TO A VALUE NOT EXCEEDING \$ **1.25** (TO BE COMPLETED BY PERSON SIGNING BELOW)
NOTICE: THE SHIPPER SIGNING THIS CONTRACT MUST INSERT IN THE SPACE ABOVE IN HIS OWN HANDWRITING, EITHER HIS DECLARATION OF THE ACTUAL VALUE OF THE SHIPMENT, OR THE WORDS "60 CENTS PER POUND PER ARTICLE." OTHERWISE, THE SHIPMENT WILL BE DEEMED RELEASED TO A MAXIMUM VALUE EQUAL TO \$1.25 TIMES WEIGHT OF THE SHIPMENT IN POUNDS.

TRANSPORTATION CHARGES	TARIFF	SECTION	MILES	RATE	EXTENSION
	143 A	2	2763	2225	1082.40
AGT. DESCRIPTION				RATE	EXTENSION
8000 Shipment Charge					
8000 Valuation Charge	\$1.25	\$5800.		50	29.00
Extra Stop (Address)					
Add'l. Transp. Charge Origin					
314 Add'l. Transp. Charge Destination Maryland				50	23.20
Appliance Service (Indicate Items)					
Appliance Unservice					
559 Sorting - 1 man 1 hr				940	9.40
314-2 Flights stairs des-					23.20

UNITED VAN LINES, INC. AND THE ABOVE NAMED SHIPPER AGREE THAT UNITED VAN LINES, THE CARRIER, SHALL TRANSPORT THE GOODS AND EFFECTS TENDERED BY THE SHIPPER, SUBJECT TO THE PRECEDING.
SIGNED **X** **Carl H. Thomas** SHIPPER DATE **12/3/71**
CARRIER **UNITED VAN LINES INC.**

CONTAINERS PURCHASED		CONTAINERS				PACKING SCHEDULE ()				UNPACKING SCHEDULE ()						
FROM AGENT	559	QTY	RATE	EXTENSION	CU FT	QTY	BY AGT	RATE	EXTENSION	CU FT	QTY	BY AGT	RATE	EXTENSION		
BARRELS OR OISH PAILS		5	12	200	24.00	5	12	559	725	87.00	5	12		200	24.00	
CARTONS LESS THAN 1 1/2		1	3	75	2.25	1	3		175	5.25	1	3		60	1.50	
CARTONS		3	16	75	12.00	3	16		275	44.00	3	16		75	12.00	
CARTONS		6	2	75	1.50	6	2		375	7.50	6	2		100	2.00	
CARTONS		3	500	15.00		3			200	6.00	3			25	.75	
MATTRESS CARTONS		2	190	3.00		2			105	3.70	2			75	1.50	
CRATES/CONTAINERS MINIMUM SIZE (MIRRORS)		1				1			500	5.00	1			100	1.00	
CRATES/CONTAINERS OVER MIN. SIZE (MIRRORS)		5				5			150	7.50	5			25	1.25	
TOTAL CONTAINERS		58.55				TOTAL PACKING				165.95	TOTAL UNPACKING				44.00	268.50

Storage-In-Transit Origin Destination
Authorized By _____ Date: _____
X (SIGNATURE OF SHIPPER OR CONSIGNEE)

PREPAYMENT REC'D _____ DATE _____ CODE _____
BY _____
PAYMENT REC'D. AT DESTINATION _____ DATE _____ CODE _____
BAL. DUE **1385.70**

OVERSEAS CONTAINERS					
1	2	3	4	5	TOTALS
Gross					
Tare					
Net					
Cube					
CONTAINER NUMBER					
CODE	NAME	PHONE NO.			
Book. Agt	559 Fulton B&S	1-503-235-6677			
Dest. Agt	422 Merchants T&S	1-202-547-7777			
Origin Agt	559 Fulton B&S	1-503-235-6677			
G-11 Agt					

ESTIMATED CHARGES _____
110% OF ESTIMATE _____
COLLECT SHIPMENTS: Collect shipments must be paid in cash, money order or cashiers check before property is relinquished by U.V.L. Money orders and drafts must be payable to UNITED VAN LINES. All charges subject to audit and necessary will be corrected by credit or additional billings.
SPECIAL SERVICES: Excl. Use of Van Excl. Use of Trailer Excl. Use of Equipment Excl. Use of Driver
 Space Res. of the Original Complete Occupancy
Moving at _____ Lbs. Actual _____ Lbs.
 Length of Space Ordered _____
SHIPPER REQUESTS REPELOR NOTIFICATION OF ACTUAL WEIGHT & CHARGES TO _____
ADDRESS: _____
IN CASE OF DELAY, **Revenue Accounting Department**
UNITED VAN LINES, INC.
DELIVERY ACKNOWLEDGMENT: SHIPMENT WAS RECEIVED IN GOOD CONDITION EXCEPT AS NOTED ON INVENTORY, AND SERVICES ORDERED WERE PERFORMED.
SIGNED **Fannie Faulkner** DATE **12/2/71**

DELIVERED BY DRIVER SIGNATURE **Carl H. Thomas** DATE **12/3/71**
DRIVER CODE **109-394-14**
ANY MOTOR CARRIER, OR OTHER PERSON, OR ANY OFFICER, AGENT, EMPLOYEE, OR REPRESENTATIVE THEREOF, WHO SHALL KNOWINGLY AND WILLFULLY NEGLECT OR FAIL TO MAKE FULL, TRUE AND CORRECT ENTRIES OR WHO SHALL KNOWINGLY AND WILLFULLY FALSIFY, DESTROY, MUTILATE, OR ALTER THIS RECEIPT OR BILL OF LADING, SHALL BE SUBJECT TO A PENALTY OF \$5,000 FOR EACH SUCH OFFENSE. (SEC. 222; 49 U. S. C. 322)

REC'D FOR STORAGE _____ (WAREHOUSE)
BY _____ (WAREHOUSEMAN'S SIGNATURE) DATE _____ PER _____



CERTIFICATION OF PACKING AND UNPACKING

ORDER NUMBER
559 313 71

ORIGIN

SHIPPER Fannie Faulkner

STREET 327 N Fargo

CITY Portland, STATE Oregon

DESTINATION

CONSIGNEE Fannie Faulkner

STREET 6509 Cockerville Ave.

CITY Takoma Park, STATE Maryland

Containers Furnished and Packed by Carrier

DESCRIPTION	CU. FT.	QTY.
BARRELS OR DISH PACKS	5	12
CARTONS LESS THAN 1½	1½	
CARTONS 1½	1½	3
CARTONS 3	3	16
CARTONS 4½	4½	
CARTONS 6	6	2
CARTONS 6½	6½	
WARDROBES		3
MATTRESS CARTONS		2
CRATES/CONTAINERS (MIRRORS) MINIMUM SIZE		1
CRATES/CONTAINERS OVER MINIMUM SIZE (MIRRORS)		
Mirror 5'	5'	1

Packed by SFD Fulton Moving and Storage, Inc.
I certify that the number of containers indicated above were packed by the carrier.

Fannie Mac Faulkner
Signature of Shipper or His Representative

UVL-12
A-23-70

FIRST COPY TO UVL FOR CONTRACT FILE

Containers Unpacked by Carrier

DESCRIPTION	CU. FT.	QTY.
BARRELS OR DISH PACKS	5	12
CARTONS LESS THAN 1½	1½	
CARTONS 1½	1½	3
CARTONS 3	3	16
CARTONS 4½	4½	
CARTONS 6	6	2
CARTONS 6½	6½	
WARDROBES		3
MATTRESS CARTONS		2
CRATES/CONTAINERS (MIRRORS) MINIMUM SIZE		1
CRATES/CONTAINERS OVER MINIMUM SIZE (MIRRORS)		
Mirror 5'	5'	1

Unpacked by Paul Thomas
DRIVER I. D. No. _____
I certify that the number of containers indicated above were unpacked by the carrier.

Fannie Faulkner
Signature of Shipper or His Representative

DISPOSAL OF THE PACKING MATERIAL ON ITEMS UNPACKED AT A DATE OTHER THAN THE ORIGINAL UNPACKING DATE IS THE RESPONSIBILITY OF THE CONSIGNEE

Milbin Printing, Inc.

ARCO



Norris Bros. Truck & Auto Centers

No. 9443

Date 11/17/71
Weight

Phone
(503) 772-9675
2390 N. Pacific Hwy.
Medford, Oregon 97501

Phone
(503) 236-8611
1208 S.E. 8th Avenue
Portland, Oregon 97214

40980 lbs. GROSS

Name United Van Lines

lbs. TARE

Address _____

lbs. NET

TRUCK NUMBER 123394

Commodity _____ per lb. _____

Remarks: 109-394-14
109-394-14

Driver

On ()

CERTIFIED WEIGHT

Off

559-313-71

Load No. _____

Janniv Faulkner

Weigher

Steve Argenton

Shipper _____

Paid

100

Seller _____

Buyer _____

Chg. _____

Address _____

Signature _____

ARCO 

Norris Bros.

Truck & Auto Centers

No. 9410

Date 11-16-71

Phone
(503) 772-9675

2390 N. Pacific Hwy.
Medford, Oregon 97501

Phone
(503) 236-8611

1208 S.E. 8th Avenue
Portland, Oregon 97214

Weight

lbs. GROSS

3 6 3 4 0 lbs. TARE

Name

UNITED VAN LINES

Address _____

lbs. NET

TRUCK NUMBER

123 394-

Commodity

109-394-14 per lb.

Remarks:

109-394-14 Driver

On ()

Off ()

CERTIFIED WEIGHT

559-313-71

Load No. _____

Fannie

Weigher

Bob Norris

Shipper

FAULKNER

Paid

100

Seller

Buyer

Chg. _____

Address _____

Signature _____

HOUSEHOLD GOODS DESCRIPTIVE INVENTORY

TAG LOT NO.

PAGE NO. 4 NO. OF PAGES

CONTRACTOR OR CARRIER
United Van Lines
FENTON, MISSOURI

TAG COLOR _____ NOS. _____ THR _____
AGENT _____

CARRIER'S REFERENCE NO.
559 313

OWNER'S GRADE OR RATING AND NAME
Faulkner

CONTRACT OR GBL. NO.

ORIGIN LOADING ADDRESS _____ CITY _____ STATE _____

GOVT. SERVICE ORDER NO.

DESTINATION _____

VAN NUMBER
109 394

DESCRIPTIVE SYMBOLS
B/W - BLACK & WHITE TV
C - COLOR TV
CP - CARRIER PACKED
PBO - PACKED BY OWNER
CD - CARRIER DISASSEMBLED
DBO - DISASSEMBLED BY OWNER
PB - PROFESSIONAL BOOKS
PE - PROFESSIONAL EQUIPMENT
PP - PROFESSIONAL PAPERS

EXCEPTION SYMBOLS
BE - BENT
BR - BROKEN
BU - BURNED
CH - CHIPPED
CU - CONTENTS & CON-
DITON UNKNOWN
D - DENTED
F - FADED
S - SOURED
L - LOOSE
M - MARRED
MI - MILDEW
MD - MOTTLE
R - RUBBED
RU - RUSTED

LOCATION SYMBOLS
1. ARM 7. REAR
2. BOTTOM 8. RIGHT
3. CORNER 9. SIDE
4. FRONT 10. TOP
5. LEFT 11. VENEER
6. LEGS 12. EDGE

NOTE: THE OMISSION OF THESE SYMBOLS INDICATES GOOD CONDITION EXCEPT FOR NORMAL WEAR.

ITEM NO.	WHSE. CR. REF.	ARTICLES	CONDITION AT ORIGIN	DELIVERY AT RESIDENCE CHECK <input type="checkbox"/>	EXCEPTIONS (IF ANY) AT DESTINATION
11	1	SMALL CARTON PBO			
	2	MED " " PBO			
	3	" " " CP			
	4	SMALL " " CP			
	5	MED " " CP			
	6	ROG + IAD	SC WT		
	7	SMALL CARTON CP			
	8	RED CASE	SC		
	9	GREY CASE	SC		
12	0	LAMP TABLE	12 CH 3 SC 458745 SC CH D		
	1	MARBLE	TO BE PUT IN CRATE		
	2	COUCH	SC W MASTER OFF 17L		
	3	"	SC W 7L		
	4	DESK CHAIR	SC R CH 61D7		
	5	METAL STAND	SC R		
	6	MED CARTON PBO			
	7	MIRROR	TO BE CRATED		
	8	Pole LAMP	SC BU WORPED		
	9	HEATER	SC CU		
13	0	STEREO	10 SC CH 55 SC 6 R 6 SC 12 CH 3 R		
	1	TV	10 SC 617 CA MR 358730 R CH		
	2	ARM CHAIR	1 458 SC M CH 6 6 SC M CH 707 M B ER		
	3	MED CARTON CP			
	4	" " " CP			
	5	LARGE " " CP			
	6	" " " CP			
	7	MED " " CP			
	8	DISH PACK CP			
	9	" " " CP			
14	0	" " " CP			

REMARKS/EXCEPTIONS _____

"WE HAVE CHECKED ALL THE ITEMS LISTED AND NUMBERED 1 TO _____ INCLUSIVE AND ACKNOWLEDGE THAT THIS IS A TRUE AND COMPLETE LIST OF THE GOODS TENDERED AND OF THE STATE OF THE GOODS RECEIVED."

WARNING →

BEFORE SIGNING - CHECK SHIPMENT, COUNT ITEMS AND DESCRIBE LOSS OR DAMAGE IN SPACE ON THE RIGHT ABOVE.

AT ORIGIN	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE	AT DESTINATION	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE
	(SIGNATURE) <i>Carl H. Thomas</i>	TIME		(SIGNATURE) <i>Carl H. Thomas</i>	TIME
	OWNER OR AUTHORIZED AGENT	DATE		OWNER OR AUTHORIZED AGENT	DATE
	(SIGNATURE)	TIME		(SIGNATURE) <i>Fannie Faulkner</i>	TIME

RP-2

LOT NO.

PAGE NO. 2

NO. OF PAGES 4

AGENT

NOS.

THRU

CARRIER'S REFERENCE NO. 559-313

CONTRACT OR GBL. NO.

OWNER'S GRADE OR RATING AND NAME FANTON, MISSOURI FAULKNER

ORIGIN LOADING ADDRESS

CITY

STATE

GOVT. SERVICE ORDER NO.

DESTINATION

VAN NUMBER 109-394

DESCRIPTIVE SYMBOLS

B/W - BLACK & WHITE TV
C - COLOR TV
CP - CARRIER PACKED
PBO - PACKED BY OWNER
CD - CARRIER DISASSEMBLED
DBO - DISASSEMBLED BY OWNER
PB - PROFESSIONAL BOOKS
PE - PROFESSIONAL EQUIPMENT
PP - PROFESSIONAL PAPERS

EXCEPTION SYMBOLS

BE - BENT
BR - BROKEN
BU - BURNED
CH - CHIPPED
CU - CONTENTS & CON-
DIT ION UNKNOWN
D - DENTED
F - FADED
G - GOUGED
L - LOOSE
M - MARRED
MI - MILDEW
MO - MOTHEATEN
R - RUBBED
RU - RUSTED

SC - SCRATCHED
SH - SHORT
SO - SOILED
T - TORN
W - BADLY WORN
Z - CRACKED

LOCATION SYMBOLS

1. ARM 7. REAR
2. BOTTOM 8. RIGHT
3. CORNER 9. SIDE
4. FRONT 10. TOP
5. LEFT 11. VENEER
6. LEGS 12. EDGE

NOTE: THE OMISSION OF THESE SYMBOLS INDICATES GOOD CONDITION EXCEPT FOR NORMAL WEAR.

Table with columns: ITEM NO., WHSE. CR. REF., ARTICLES, CONDITION AT ORIGIN, DELIVERY AT RESIDENCE CHECK, EXCEPTIONS (IF ANY) AT DESTINATION. Contains handwritten entries for items 14 through 17, including furniture like tables, chairs, and a desk.

REMARKS/EXCEPTIONS

"WE HAVE CHECKED ALL THE ITEMS LISTED AND NUMBERED 1 TO... INCLUSIVE AND ACKNOWLEDGE THAT THIS IS A TRUE AND COMPLETE LIST OF THE GOODS TENDERED AND OF THE STATE OF THE GOODS RECEIVED."

WARNING

BEFORE SIGNING - CHECK SHIPMENT, COUNT ITEMS AND DESCRIBE LOSS OR DAMAGE IN SPACE ON THE RIGHT ABOVE.

Signature table with columns for AT ORIGIN and AT DESTINATION, including fields for CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER) and OWNER OR AUTHORIZED AGENT, with signature lines and date/time fields.

HOUSEHOLD GOODS DESCRIPTIVE INVENTORY

TAG LOT NO.

CONTRACTOR OR CARRIER United Van Lines FENTON, MISSOURI		TAG COLOR AGENT	NOS.	THRU	PAGE NO. 3	NO. OF PAGES 4
OWNER'S GRADE OR RATING AND NAME FALL RIVER				CARRIER'S REFERENCE NO. 559-313		
ORIGIN LOADING ADDRESS				CITY		STATE
DESTINATION				GOVT. SERVICE ORDER NO.		
				VAN NUMBER 117 341		

DESCRIPTIVE SYMBOLS
 B/W - BLACK & WHITE TV DBO - DISASSEMBLED BY OWNER
 C - COLOR TV PB - PROFESSIONAL BOOKS
 CP - CARRIER PACKED PE - PROFESSIONAL EQUIPMENT
 PBO - PACKED BY OWNER PP - PROFESSIONAL PAPERS
 CD - CARRIER DISASSEMBLED

EXCEPTION SYMBOLS
 BE - BENT D - DENTED M - MARRED SC - SCRATCHED
 BR - BROKEN F - FADED MI - MILDEW SH - SHORT
 BU - BURNED G - GOUGED MO - MOLTEN SO - SOILED
 CH - CHIPPED L - LOOSE RU - RUBBED T - TORN
 CU - CONTENTS & CON- R - RUSTED W - BADLY WORN
 DITION UNKNOWN Z - CRACKED

LOCATION SYMBOLS
 1. ARM 7. REAR
 2. BOTTOM 8. RIGHT
 3. CORNER 9. SIDE
 4. FRONT 10. TOP
 5. LEFT 11. VENEER
 6. LEGS 12. EDGE

NOTE: THE OMISSION OF THESE SYMBOLS INDICATES GOOD CONDITION EXCEPT FOR NORMAL WEAR.

ITEM NO.	WHSE. CR. REF.	ARTICLES	CONDITION AT ORIGIN	DELIVERY AT RESIDENCE CHECK V.	EXCEPTIONS (IF ANY) AT DESTINATION
171		GLASS TACK CP			
2		" " CP			
3		" " CP			
4		DRESSER BASE	SCRM DCH		
5		LAMP TABLE	W SCRMCHDG		
6		DRESSER BASE	W SCRMCHDG		
7		NIGHT STAND	W SCRMCHDG		
8		STOOL	Z W SCRMDSO		
9		DISH PACK CP			
150		" " CP			
1		SMALL CARTON CP			
2		1/2 MATTRESS " CP			
3		1/2 BOX STRING " CP			
4		BED RAILS ON Y	SCR		
5		HEAD BOARD	SC B DCH		
6		FOOT " "	SC B DCH		
7		BED STAT. ON 3	NW		
8		WARD ROBE CP			
9		" " CP			
190		MFD CARTON CP			
1		" " CP			
2		" " CP			
3		TRUNK	SC BFDW		
4		LADDER	W		
5		TRUNK	W BED SCRM RU		
6		LAMP TABLE	W B CH D G - CK D M G 6		Publ. C.A. BR.
7		BASKET	NW BR		
8		BUCKET	W BE		
9		BASKET	W		
0		" " CP	W		

REMARKS/EXCEPTIONS

"WE HAVE CHECKED ALL THE ITEMS LISTED AND NUMBERED 1 TO _____ INCLUSIVE AND ACKNOWLEDGE THAT THIS IS A TRUE AND COMPLETE LIST OF THE GOODS TENDERED AND OF THE STATE OF THE GOODS RECEIVED."

WARNING

BEFORE SIGNING—CHECK SHIPMENT, COUNT ITEMS AND DESCRIBE LOSS OR DAMAGE IN SPACE ON THE RIGHT ABOVE.

AT ORIGIN	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE	AT DESTINATION	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE
	(SIGNATURE)	TIME		(SIGNATURE)	TIME
	OWNER OR AUTHORIZED AGENT	DATE		OWNER OR AUTHORIZED AGENT	DATE
	(SIGNATURE)	TIME		(SIGNATURE)	TIME

PRINTED IN U.S.A. FORM NO. C-10-65 REV. 8-70
MILBURN PRINTING INC.

FOR FURTHER ASSISTANCE CONTACT OUR DESTINATION AGENT AS SHOWN ON BILL OF LADING.

4 U. V. L. COPY FOR NATIONAL ACCOUNT BILLING

U.V.L. 4

HOUSEHOLD GOODS DESCRIPTIVE INTERIM

CONTRACTOR OR CARRIER United Van Lines FENTON, MISSOURI		TAG COLOR _____ NOS. _____	4 CARRIER'S REFERENCE NO. 557-313
OWNER'S GRADE OR RATING AND NAME FAULKNER		AGENT _____	CONTRACT OR GBL. NO. _____
ORIGIN LOADING ADDRESS _____		CITY _____ STATE _____	GOVT. SERVICE ORDER NO. _____
DESTINATION _____		VAN NUMBER 109-394	
DESCRIPTIVE SYMBOLS B/W - BLACK & WHITE TV DBO - DISASSEMBLED BY OWNER C - COLOR TV PB - PROFESSIONAL BOOKS CP - CARRIER PACKED PE - PROFESSIONAL EQUIPMENT PBO - PACKED BY OWNER PP - PROFESSIONAL PAPERS CD - CARRIER DISASSEMBLED		EXCEPTION SYMBOLS BE - BENT D - DENTED M - MARRED SC - SCRATCHED BR - BROKEN F - FADED MI - MILDREW SH - SHORT BU - BURNED G - GOUGED MO - MOTHEATEN SO - SOILED CH - CHIPPED L - LOOSE RU - RUBBED T - TORN CU - CONTENTS & CON- W - BADLY WORN Z - CRACKED DITION UNKNOWN	

NOTE: THE OMISSION OF THESE SYMBOLS INDICATES GOOD CONDITION EXCEPT FOR NORMAL WEAR.

ITEM NO.	WHSE. CR. REF.	ARTICLES	CONDITION AT ORIGIN	DELIVERY AT RESIDENCE CHECK <input type="checkbox"/>	EXCEPTIONS (IF ANY) AT DESTINATION
201		KITCHEN	W		
2		TABLE LEAFS 244	SCRM 600 PEELED Z		
3		ISBO GRILL	PU SCRUBED		
4		LAWN MOWER	W RUSCMR		
5		ISBO GRILL	W RUSCMR		
6		G TOOL 26	W RV		
7		G CAN	W		
8		LAWN MOWER	W RUSCMR		
9		G TOOL 44	W		
10		HAND TISSUE 3	W RUSCMR		
1		HAMM STOVE	BU 10		
2		WASH FREEZER	IP 45 87 SCRUBED MR		W RUSCMR BR
3		STOVE	SCRM		
4		MED CARTON CP			
5		" " CP			
6		" " CP			
7		DISH PACK CP			
8		" " CP			
9		" " CP			
200		" " CP			
1		" " CP			
2		MED CARTON CP			
3		SMALL " CP			
4		SMALL " CP			
5		WASH PACK CP			
6					
7					
8					
9					
0					

REMARKS/EXCEPTIONS _____

"WE HAVE CHECKED ALL THE ITEMS LISTED AND NUMBERED 1 TO _____ INCLUSIVE AND ACKNOWLEDGE THAT THIS IS A TRUE AND COMPLETE LIST OF THE GOODS TENDERED AND OF THE STATE OF THE GOODS RECEIVED."

WARNING →

BEFORE SIGNING—CHECK SHIPMENT, COUNT ITEMS AND DESCRIBE LOSS OR DAMAGE IN SPACE ON THE RIGHT ABOVE.

AT ORIGIN	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE	AT DESTINATION	CONTRACTOR, CARRIER OR REPRESENTATIVE (DRIVER)	DATE
	(SIGNATURE) _____	TIME		(SIGNATURE) Carl H. Thomas	TIME
AT ORIGIN	OWNER OR AUTHORIZED AGENT	DATE	AT DESTINATION	OWNER OR AUTHORIZED AGENT	DATE
	(SIGNATURE) _____	TIME		(SIGNATURE) Therese F. Anderson	TIME



UNIFORM HOUSEHOLD GOODS BILL OF LADING AND FREIGHT BILL
I.C.C. NO. 67

PLEASE REFER TO THIS NUMBER IN ANY CORRESPONDENCE
ORDER NUMBER

FENTON MISSOURI
PHONE: 314-DA 6-3100

DELIVERING CARRIER (IF ANY)

FROM SHIP HOUSEHOLD GOODS DESCRIBED BELOW TO

559 313 71

SHIPPER **Fannie Faulkner**
COMPANY (ASSOCIATED WITH) **World Develop Comm**
ORIGIN **Portland, Oregon**
STREET ADDRESS **327 N Fargo**
EXTRA STOP ADDRESS
DATE LOADED **11/16**

CONSIGNEE **Fannie Faulkner**
DESTINATION **Takoma Park, Maryland**
STREET ADDRESS
EXTRA STOP ADDRESS **6609 Cockerville Ave.**
If Delivery Address Other Than Above: AUTH. BY

1. C.O.D. CHARGE PREPAID
AGREED DELIVERY PERIOD
EARLIEST **11/21** LATEST **12/7**
BILL TO **World Development Commission**
STREET **Site Office - Emanuel Hosp. Project**
CITY **235 N. Monroe St., Ptd, Oregon**
Attn: **W. Stanley Jones**

SHIPPER: ORIGINAL REWEIGH
The tare weight of the vehicle must be entered on this line prior to loading your shipment on the vehicle.
Gross **40980**
Tare **36340 (36340)**
Net **4640**
Min. Wt.

2. THE RULES, REGULATIONS, RATES AND CHARGES SET OUT IN THE TARIFF CURRENTLY IN EFFECT ON THE DAY OF LOADING, AS FILED WITH THE INTERSTATE COMMERCE COMMISSION, SHALL GOVERN THIS SHIPMENT.
3. ALL TERMS WRITTEN, PRINTED, STAMPED OR TYPED ON THE FRONT OR BACK OF THIS FORM ARE AGREED TO BY BOTH PARTIES.
4. UNLESS THE SHIPPER EXPRESSLY RELEASES THE SHIPMENT TO A VALUE OF 60 CENTS PER POUND PER ARTICLE, THE CARRIER'S MAXIMUM LIABILITY FOR LOSS AND DAMAGE SHALL BE EITHER THE LUMP-SUM VALUE DECLARED BY THE SHIPPER OR AN AMOUNT EQUAL TO \$1.25 FOR EACH POUND OF WEIGHT IN THE SHIPMENT, WHICHEVER IS GREATER. THE SHIPMENT WILL MOVE SUBJECT TO THE RULES AND CONDITIONS OF THE CARRIER'S TARIFF.

TARIFF	SECTION	MILES	RATE	EXTENSION
143 A	2	2763	2225	1832.40
TRANSPORTATION CHARGES				
AGT.	DESCRIPTION	RATE	EXTENSION	
	Shipment Charge			
8000	Valuation Charge \$1.25 \$5800.	50	29.00	
	Extra Stop (Address)			
	Add'l. Transp. Charge Origin			
	Add'l. Transp. Charge Destination Maryland	50	23.20	
	Appliance Service (Indicate Items)			
	Appliance Unservice			
559	Sorting - 1 man 1 hr	940	9.40	

SHIPPER HEREBY RELEASES THE ENTIRE SHIPMENT TO A VALUE NOT EXCEEDING \$ **1.25**

NOTICE: THE SHIPPER SIGNING THIS CONTRACT MUST INSERT IN THE SPACE ABOVE IN HIS OWN HANDWRITING, EITHER HIS DECLARATION OF THE ACTUAL VALUE OF THE SHIPMENT, OR THE WORDS "60 CENTS PER POUND PER ARTICLE." OTHERWISE, THE SHIPMENT WILL BE DEEMED RELEASED TO A MAXIMUM VALUE EQUAL TO \$1.25 TIMES WEIGHT OF THE SHIPMENT IN POUNDS.

UNITED VAN LINES, INC. AND THE ABOVE NAMED SHIPPER AGREE THAT UNITED VAN LINES, THE CARRIER, SHALL TRANSPORT THE GOODS AND EFFECTS TENDERED BY THE SHIPPER-SUBJECT TO THE PRECEDING.
SIGNED **Fannie Mae Faulkner** 11/16/71
CARRIER **UNITED VAN LINES INC.**

ORIGIN	FROM	TO	LBS. TO WHSE.	MILES
DESTINATION	FROM	TO	LBS. FROM WHSE.	MILES

CONTAINERS PURCHASED FROM AGENT	CONTAINERS				PACKING SCHEDULE ()				UNPACKING SCHEDULE ()				TOTAL CONTAINERS PACKING AND UNPACKING		
	BY	QTY.	RATE	EXTENSION	CU FT	QTY.	BY AGT	RATE	EXTENSION	CU FT	QUANTITY ORDERED/ACTUAL	BY AGT		RATE	EXTENSION
BARRELS OR DISH PACKS	559	5	12	200	24.00	5	12	559	725	87.00	5	12		200	24.00
CARTONS LESS THAN 1 1/2		1 1/2				1 1/2					1 1/2	3		50	1.50
CARTONS		1 1/2	3	75	2.25	1 1/2	3		175	5.25	1 1/2	3		75	12.00
CARTONS		3	16	75	12.00	3	16		275	44.00	3	16		100	2.00
CARTONS		4 1/2				4 1/2			375	7.50	4 1/2	2		25	.75
CARTONS		6	2	75	1.50	6	2		185	3.70	6	2		75	1.50
CARTONS		6 1/2				6 1/2			500	5.00	6 1/2	1		100	1.00
WARDROBES		3	500	15.00		3			150	7.50				25	1.25
MATTRESS CARTONS		2	190	3.80		2									
CRATES/CONTAINERS MINIMUM SIZE (MIRRORS)		1	-	-		1									
CRATES/CONTAINERS OVER MIN. SIZE (MIRRORS)		5	7	-											
TOTAL CONTAINERS		58.55		TOTAL PACKING		165.95		TOTAL UNPACKING		44.00		268.50			

Storage-In-Transit Origin Destination
Authorized By _____ Date: _____
X
(SIGNATURE OF SHIPPER OR CONSIGNEE)

PREPAYMENT REC'D	DATE	CODE	TOTAL
BY			PREPAID
PAYMENT REC'D. AT DESTINATION			BAL. DUE 136250

	OVERSEAS CONTAINERS					TOTALS
	1	2	3	4	5	
Gross						
Tare						
Net						
Cube						

CONTAINER NUMBER	CODE	NAME	PHONE NO.
Book. Agt	559	Fulton M&S	1-503-235-6677
Dest. Agt	422	Merchants T&S	1-202-547 7777
Port Agt			
Origin Agt	559	Fulton M&S	1-503-235-6677
G-11 Agt			
BILL OF LADING COMPLETED BY Fulton DATE 11/16/71			
DRIVER ID	VAN NO.	MAN'F NO.	PICKUP DATE
14	109 394	14	11/16/71

ESTIMATED CHARGES
110% OF ESTIMATE
COLLECT SHIPMENTS
Collect shipments must be paid in cash, money order or cashiers check before property is relinquished by U.V.L. Money orders and drafts must be payable to UNITED VAN LINES. All charges subject to audit and if necessary will be corrected by refund or additional billing.

SPECIAL SERVICES: Excl. Use of Veh. _____ Cu.Ft. Expedited Service
 Space Res. _____ Cu.Ft. Complete Occupancy
Moving at _____ Lbs. Actual _____ Lbs.
 Length of Space Ordered _____ Ft.
SHIPPER REQUESTS REWEIGH NOTIFICATION OF ACTUAL WEIGHT & CHARGES TO _____
ADDRESS _____ TEL. _____
IN CASE OF DELAY, NOTIFY _____
ADDRESS _____ TEL. _____

DELIVERY ACKNOWLEDGMENT: SHIPMENT WAS RECEIVED IN GOOD CONDITION EXCEPT AS NOTED ON INVENTORY, AND SERVICES ORDERED WERE PERFORMED.

SIGNED **X** (CONSIGNEE) DATE _____
REC'D FOR STORAGE (WAREHOUSE) BY _____ DATE _____ PER _____

DELIVERED BY DRIVER SIGNATURE _____ DATE _____

ANY MOTOR CARRIER, OR OTHER PERSON, OR ANY OFFICER, AGENT, EMPLOYEE, OR REPRESENTATIVE THEREOF, WHO SHALL KNOWINGLY AND WILLFULLY NEGLECT OR FAIL TO MAKE FULL, TRUE AND CORRECT ENTRIES OR WHO SHALL KNOWINGLY AND WILLFULLY FALSIFY, DESTROY, MUTILATE, OR ALTER THIS RECEIPT OR BILL OF LADING, SHALL BE SUBJECT TO A PENALTY OF \$5,000 FOR EACH SUCH OFFENSE. (SEC. 222; 49 U. S. C. 322)

ESTIMATED COST OF SERVICES

Moving
401 SE 8th
235-6677



United Van Lines
FENTON (St. Louis County), MISSOURI ICC. NO. 67234

Date Oct 27, 1971
Order No. _____

Name of shipper: Fannie Faulkner Phone No. _____
Address of shipper: 327 N. Fargo Zip code _____
Shipment moving from: Portland to Takoma Park, Maryland
Shipper's destination contact: _____ Phone No. _____
Packing Date Requested: _____ Loading Date Requested: _____ Delivery Date or period of time requested: _____

IMPORTANT NOTICE: This estimate covers only the articles and services listed. It is not a guarantee that the actual charges will not exceed the amount of the estimate. Common carriers are required by law to collect transportation and other incidental charges computed on the basis of rates shown in their lawfully published tariffs, regardless of prior rate quotations or estimates made by the carrier or its agents. Exact charges for loading, transporting, and unloading are based upon the weight of the goods transported, and such charges may not be determined prior to the time the goods are loaded on the van and weighed. Charges for additional services will be added to the transportation charges.

I HEREBY ACKNOWLEDGE that I have received from (CHECK ONE)
 the carrier supplying this estimate
 a carrier supplying another estimate
 other source
 Summary of Information for Shippers of Household Goods, Form BOp 103.
 SIGNATURE OF SHIPPER OR HIS REPRESENTATIVE

ESTIMATED COST OF SERVICES (Based on tariff 143-A MF-I.C.C. No. Sec II)
 Transportation: Est. wt. 3780/4000 lbs.; 2763 mi.; @ \$ 22.25 per 100 lbs. \$ 890.00
 Valuation Charge: { for liability on part of carrier in excess of that assumed when its lowest rates are charged }
 On Transportation: \$ _____ @ 50¢ per \$100, or fraction thereof
 On Storage-in-Transit @ _____ ¢ per CWT. (10% of monthly storage rate) for each 30 days or fraction thereof
 Additional transportation charges: (explain) Item 170 Area 25 50 cwt 20.00
 Pickup or delivery for storage in transit _____ lbs.; @ \$ _____ per 100 lbs. { for each 30 days }
 Storage in transit at _____ lbs.; @ _____ ¢ per 100 lbs. { or fraction thereof }
 Warehouse handling _____ lbs.; @ _____ ¢ per 100 lbs. (one time charge)
 Extra pickup or delivery at _____
 Special servicing of appliances _____
 Hoisting, lowering, or carrying pianos, heavy articles _____ (EXPLAIN)

ESTIMATED CHARGES \$ 890.00
 TOTAL ESTIMATED COST \$ 948.50

If the total tariff charges for the listed articles and services exceed this estimate by more than ten percent, then, upon your request, the carrier must relinquish possession of your shipment upon delivery in advance of the payment of the total amount of tariff charges shown on the bill of lading or freight bill. You are still obligated to pay the balance of the total charges within 15 days.

CONTAINERS (see below) _____
 Packing (see below) _____
 Unpacking (see below) _____
 Labor _____ man/men for _____ hrs.; @ _____ (per man per hour)
 Other services _____ (EXPLAIN)

Maximum amount to be paid on delivery of your C.O.D. shipment in cash, certified check or money order is (total estimated cost plus 10 percent):
10.00
24.00
4.50
 \$ _____

TOTAL ESTIMATED COST \$ 948.50

ESTIMATED COST OF CONTAINERS, AND PACKING AND UNPACKING SERVICES

	CONTAINERS			PACKING			UNPACKING		
	ESTIMATED NUMBER	PER EACH	TOTAL	ESTIMATED NUMBER	PER EACH	TOTAL	ESTIMATED NUMBER	PER EACH	TOTAL
BARREL, dish-pack, drum, et cetera			\$			\$			\$
BOXES, not over 5 cubic feet									
over 5 not over 8 cubic feet									
CARTONS: Less than 1½ cubic feet									
1½ cubic feet									
3 cubic feet									
4½ cubic feet									
6 cubic feet									
6½ cubic feet									
Wardrobe Carton <u>clothes - plant</u>	<u>2</u>	<u>5.00</u>	<u>10.00</u>	<u>2</u>	<u>2.00</u>	<u>4.00</u>	<u>2</u>	<u>.25</u>	<u>50</u>
Crib Mattress Carton									
Mattress Carton (Not exceeding 54" x 75")									
Mattress Carton (Exceeding 54" x 75")									
Mattress Cover (plastic or paper)									
CRATES AND CONTAINERS: (SPECIALLY DESIGNED FOR MIRRORS, PAINTINGS, GLASS OR MARBLE TOPS AND SIMILAR FRAGILE ARTICLES)	<u>4</u>	<u>-</u>	<u>-</u>	<u>4</u>	<u>5.00</u>	<u>20.00</u>	<u>4</u>	<u>1.00</u>	<u>4.00</u>
Gross measurement of crate or container									
	ESTIMATED CONTAINER	COSTS	\$ <u>10.00</u>	ESTIMATED PACKING	COSTS	\$ <u>24.00</u>	ESTIMATED UNPACKING	COSTS	\$ <u>4.50</u>

Remarks: _____
 NOTICE: It is mandatory that the total cubic footage shown on the table of measurements be multiplied by not less than 7 to determine the total estimated weight. Articles not to be shipped should be indicated by a "check mark" in the column provided on the table of measurements.
 If the prospective shipper has not previously been furnished with the Summary of Information for Shippers of Household Goods as required by the Interstate Commerce Commission, he should be furnished at this time.

1. SHIPPER Total Number of Articles Estimated

Bob Stutes 235-6677
 (SIGNATURE AND TITLE OF ESTIMATOR)

16 November (date)

Fulton Van & Storage, Inc.
401 S. E. 8th Avenue
Portland, Oregon

RE: Relocation Move

The following relocation move is subject to reimbursement under the Urban Renewal Act. On satisfactory completion of the job, carrier may submit claimant's statement to this office for payment by the Commission. Maximum \$200.00.

XXXXXXXXXXXXXXXXXX

Claimant: _____

FANNIE MAE FAULKNER

Pickup Address: _____

327 N. Fargo, Portland, Oregon 97227

Delivery Address: _____

6609 Cockerville Avenue, Takoma Park, Md. 20783

Time and Date: _____

November 16, 1971

Rate: _____

published PUC or ICC rates as applicable

Description: _____

household furniture and furnishings

* ^{AUTHORIZATION guide} ~~GENERALIZATIONS~~ to carry additional insurance coverage for full value.

Overtime must be authorized in writing.

Pickup and delivery--above locations only.

All billings must be in claimant's name.

Submit this letter or copy with statement.

Other commitments strictly between carrier and claimant.

Very truly yours,

W. Stanley Jones

WSJ:slc
enc.

Faukner

W. Cook
4 bedroom

Living Room

1. Sectional 2 pc
- 1 Couch
- 1 TV
- 1 Combination
- 1 Piano - upright & stool
- 1 Ottoman
- 2 end table.
- 1 Rug 7x12
- 1 mirror
- 1 Pale Lamp
- 1 table Lamp

Dining Room

- 1 table
- 1 Sofa
- 1 Buffet
- 1 Love seat w/ mirror
- 1 Desk + Chair
- 6 Chairs

#1 Bed Room

- 1 bed & Spring
- 1 Chest of Drawers
- 1 Vanity & stool
- 1 Night Stand
- 1 m + m Dresser
- 1 Dress w/ mirror
- 1 ott
- 1 mag rack
- 1. T.V. Sm
- 2. Lamp like

Kitchen

- 1 Range
- 1 Reg. Philips
- 1 Kit Table
- 4 " Chair
- 1 high stool
- 1 work-gate
- 1 freezer

30 boxes + carton

1 Trunk

1 Lawn Mower.

#2 2 Bed + Sprung

2 Trunk

1 Table

4 Chair

otto man

end table

Stool

#3

1 Dresser

1 Vanity

1 night Stand

1 table lamp

2 chair

2 Suit Cases

2 chest of drawers

December 2, 1971

Fannie M. Faulkner
6609 Cockerille Avenue
Takoma Park, Maryland 20012

Dear Mrs. Faulkner:

We checked with the moving company, and also with the statement that you signed for the move. The moving dates that you agreed on were November 21 to December 7, 1971. United Van Lines must deliver by December 7th or be subject to a fine of \$500.00. The place to contact there is Merchant Transportation and Storage (telephone: 1-202-547-7777); have them run a tracer or give you an approximate date of delivery.

We all wish you a happy holiday season and hope that you will be pleased with your return to the D.C. area.

Best Wishes,

James Crolley
Relocation Advisor

JC:sic

16 November 1971

Fulton Van & Storage, Inc.
401 S. E. 8th Avenue
Portland, Oregon

RE: Relocation Move

The following relocation move is subject to reimbursement under the Urban Renewal Act. On satisfactory completion of the job, carrier may submit claimant's statement to this office for payment by the Commission. Maximum \$200.00.

XXXXXXXXXXXXXXXXXXXX

Claimant: _____
 FANNIE MAE FAULKNER
Pickup Address: _____
 327 N. Fargo, Portland, Oregon 97227
Delivery Address: _____
 6609 Cockerville Avenue, Takoma Park, Md. 20783
Time and Date: _____
 November 16, 1971
Rate: _____
 published PUC or ICC rates as applicable
Description: _____
 household furniture and furnishings

GENERAL PROVISIONS:

- Overtime must be authorized in writing.
- Pickup and delivery--above locations only.
- All billings must be in claimant's name.
- Submit this letter or copy with statement.
- Other commitments strictly between carrier and claimant.

Very truly yours,

W. Stanley Jones

WSJ:slc
enc.

Housing Additive
 Rent Supp.
 Down Payment
 Economic Rent

Relocatee _____ Address _____

ITEM	SUBJECT			COMPARABLE #1			COMPARABLE #2			COMPARABLE #3		
	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms	BR	Bath	Total Rooms
Multiple Listing #	XXX											
Sale or Rent Price												
Address												
No. of Rooms	3	2					3	1		3	1/2	
Type												
State of Repair												
Type of Neighborhood												
Street Improvements												
Availability of Public Services												
Lot Size				70X147 112X136			110X100					
Year Built												
Fireplace												
Heating System												
Basement												
Garage												
Habitable Area												
Total Area												
Furnished or Unfurnished												
Extraordinary Amenities				735.21			535					

Comparable # _____ is considered most like subject because:

The adjusted price is \$ _____ . Explain _____

By _____ Date _____

RECEIVED

NOV 26 1971

LAW OFFICES OF
E. F. BLANCHARD

BLANCHARD BUILDING
1353 HOLTON LANE
LANGLEY PARK, MARYLAND 20787
439-4700

SUITE 302
121 CONGRESSIONAL LANE
ROCKVILLE, MARYLAND 20852
881-6100

PORTLAND DEVELOPMENT COMMISSION
SUITE 203-4, IVERSON MALL
SOUTHERN MARYLAND BANKING & TRUST BUILDING
3731 BRANCH AVENUE
HILLCREST HEIGHTS, MARYLAND 20031
423-6900

UPPER MARLBORO
5311 WATER STREET
UPPER MARLBORO, MARYLAND 20780
627-1000

ASSOCIATES

WM. R. SACKVILLE
NEAL HAMBLETON
JOHN J. KELLIHER

November 23, 1971

Portland Development Commission
1700 S. W. Fourth Avenue
Portland, Oregon 97201

Attention: Harold D. Hand, Real Estate Supervisor

Dear Sir:

Your attention is directed to your letter of instructions of August 13, 1971, to Hugh T. Peck, Inc., in it you list the requirements to be met by Hugh T. Peck, Inc., the seller of 6609 Cockerill Avenue, Takoma Park, Maryland, the property which I had purchased from that firm, with funds from my displacement from Portland's urban renewal project.

The closing took place on September 30th, by mail, while I was still in Oregon, and as agreed, final payment was deferred for \$14,860.00 of the purchase price, and evidenced by my second trust note due on or before 30 days from that date.

The closing attorney, E. F. Blanchard, has furnished copies of settlement statements and the executed deed, and suggest they be attached hereto as exhibits showing the closing took place on September 30th. Attached also is my affidavit that I now occupy the premises as my home. Since my promissory note requires interest at the rate of Eight percent (8%), it would be appreciated if you could expedite payment to Hugh T. Peck, Inc., and thereby minimize my expenses in this relocation.

Sincerely,

Fannie Mae Faulkner

Fannie Mae Faulkner

Copy to: Hugh T. Peck, Inc.
7635 New Hampshire Avenue
Langley Park, Maryland
Attn: Mr. Reid

Holman J. Barnes, Legal Aid Service
517 N. E. Killingsworth
Portland Oregon 97211

Pioneer National Title Insurance Co.
421 S. W. Stark Street
Portland, Oregon 97204

E. F. Blanchard, Attorney
1353 Holton Lane
Langley Park, Maryland 20787
Attention: Wm. T. Stecher

A F F I D A V I T

To wit:

State of Maryland, County of PRINCE GEORGES

THIS DAY personally appeared before me,
a Notary Public in and for the State and County aforesaid,

Fannie Mae Faulkner, who, on oath, deposes
and says that: I am purchaser of parts of Lots Ten (10), Eleven (11),
Twelve (12) and Twenty (20), Gibbs and Kossack Addition to Takoma Park,
Prince George's County, Maryland, (known as 6609 Cockerille Avenue, Takoma
Park, Maryland,) and that possession was given me on November 20, 1971,
and that I now occupy this property as my home.

Fannie Mae Faulkner
Fannie Mae Faulkner



SUBSCRIBED AND SWORN to before me this 23rd day of November

William T. Stecher
Notary Public

WILLIAM T. STECHER
NOTARY PUBLIC
MY COMMISSION EXPIRES JULY 1, 1974

THIS DEED

Made this 1st day of October, 1971, by and between HUGH T. PECK, INC. party of the first part, and FANNIE MAE FAULKNER party of the second part,

WITNESSETH, that for and in consideration of the sum of TEN DOLLARS (\$10.00), receipt of which is hereby acknowledged, the said party of the first part does grant and convey unto the party of the second part, in fee simple, the following described land and premises, situate in the County of Prince George's, State of Maryland, and known and distinguished as follows:

Part of Lots Ten (10), Eleven (11), Twelve (12) and Twenty (20) in the subdivision known as BIGGS AND KOSACKS ADDITION TO TAKOMA PARK, as per plat recorded in Plat Book JWB 25 at Plat 167 and re-recorded in Plat Book A at Plat 124, with said part of Lot Twenty (20) being recorded in Plat Book WWW 16 at Folio 97 among the Land Records of Prince George's County, Maryland, and described as follows: BEGINNING for the same at a point in the Easterly line of Cockerille Avenue, Sixty-one feet fartherly from the intersection of the Easterly line of Cockerille Avenue and the Northerly line of Lake Street, thence running along Cockerille Avenue North 47° 03' West 63.00 feet, thence running in a Northeasterly direction North 42° 57' East 248.40 feet, thence Easterly and parallel to Cockerille Avenue South 47° 03' East 63.00 feet to a point thence in a Southwesterly direction running through Lots 10, 11, and 12, South 42° 57' West 148.40 feet to the place of beginning, containing 9,349 square feet of land more or less. Being the same land Described in Liber 1579 at folio 543 and Liber 1673 at folio 20. Being in the 17th Election District of said County.

together with all and singular the ways, easements, right, privileges and appurtenances to the same belonging or in anywise appertaining, and all the estate, right, title, interest and claim, either at law or in equity, or otherwise, of the said party of the first part, of, in, to or out of said land and premises.

AND the said party of the first part covenants that it will warrant specially the property hereby conveyed and that it will execute such further assurances of said land as may be requisite or necessary.

IN Testimony Whereof, the said HUGH T. PECK, INC. hath on the day of October, 1971 caused these presents to be signed by HUGH T. PECK its President and attested by RUTH V. MADDOX its Secretary, and its corporate seal to be hereunto affixed; and doth hereby appoint HUGH T. PECK its true and lawful attorney in fact to acknowledge and deliver these presents as its act and deed.

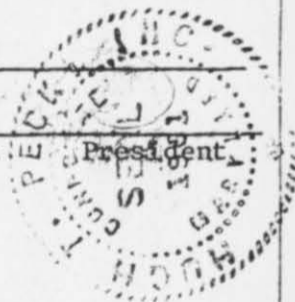
ATTEST:

HUGH T. PECK, INC.

Ruth V. Maddox
Ruth V. Maddox Secretary

by

Hugh T. Peck President



STATE OF MARYLAND)
COUNTY OF PRINCE GEORGE'S) to wit:

I, a notary public in and for the state and county aforesaid do hereby certify that HUGH T. PECK who is personally well known to me as the person named as attorney in fact in the foregoing Deed, bearing date of 1st October, 1971 and hereto annexed, personally appeared before me in said state and county and as attorney in fact as aforesaid, and by virtue of the authority vested in him by said Deed, acknowledged the same to be the act and deed of the grantor therein.

GIVEN under my hand and seal this 20th day of October, 1971.



William T. Stecher
Notary Public

WILLIAM T. STECHER
NOTARY PUBLIC

MY COMMISSION EXPIRES JULY 1, 1974

CERTIFIED A TRUE COPY
E. F. BLANCHARD, ATTORNEY
BY: W. T. Stecher

BLANCHARD BUILDING
P. O. BOX 1107
1353 HOLTON LANE
LANGLEY PARK, MD 20787
439-4700

L. F. BLANCHARD
ATTORNEY AT LAW
PURCHASER'S SETTLEMENT SHEET

SUITE 2031 IVERSON MALL
SOUTHERN MARYLAND BANKING & TRUST BUILDING
3731 BRANCH AVENUE
HILLCREST HEIGHTS, MARYLAND 20031
423-0900

Case No. 22876 Date SEPTEMBER 30, 1971
NAME FANNIE MAE FAULKNER
STREET ADDRESS 6609 COCKERILLE AVENUE, TAKOMA PARK, MARYLAND
Part of LOTS 10, 11, 12 & 20 BLOCK 11 SECTION _____
SUBDIVISION GIBBS & KOSSACK ADDITION TO TAKOMA PARK

~~PRINCE GEORGES COUNTY, MARYLAND~~
~~DIXIE ROAD, COLLEGE PARK, MARYLAND~~
PRINCE GEORGES COUNTY, MARYLAND
DEBIT CREDIT

	DEBIT	CREDIT
Price of Property	22500-	
Deposit Held By: <i>(note only)</i>		<i>F.M.F.</i>
First Trust Note <i>Hugh T Peck, Inc</i>		<i>3100-</i>
Interest on First Trust Note		
Escrow <i>(30 day)</i>		
Second Trust Note <i>Hugh T Peck, Inc</i>		<i>14860-</i>
Interest on Second Trust Note		
<i>(in 2 Bills)</i> Adjust St. and Co. Taxes, (including FFBC) @ <i>520⁶⁷</i>	38231	
<i>(in 2 Bills)</i> Town Tax Adjustment @ \$ <i>186⁷⁸</i> Fiscal Year	14009	
Fire Insurance Written By: <i>Ann Deary Agency</i> <i>1st year</i> X	47-	
Advance Taxes (mos @) to New Lender		<i>5000</i>
Advance Insurance Premium (mos. @ <i>New Lender</i>) to		
FHA Premium (mos. @) to New Lender		
% Loan Placement Fee		
Appraisal Fee (to New Lender)		
Credit Report (to New Lender)		
Assumption Fee to Mortgagee		
Survey (house location plat) <i>(NOT REQUIRED)</i>		
Title Insurance written by: _____		
Mortgagee (including binder fee): \$ _____		
Combination Mortgagee & Owners: \$ _____		
Owner's (incl. application fee): \$ <i>88.75</i>	8875	
Examination of Title	155-	
Tax Certificate & Service	5-	
Preparation of Deed	20-	
Preparation of Trust (a) <i>Two @ 35⁰⁰</i>	70-	
Notary Fees	10-	
Noting and/or Certifying Copies of Trust Papers		
Recording Deed <i>9⁰⁰</i> <i>2</i> Trusts(s) <i>36⁰⁰</i> Financing Statement	45-	
Recordation Tax	7425	
Transfer Tax (State and County) <i>112⁵⁰</i> <i>180⁰⁰</i>	29250	
Settlement Fee	50-	
		<i>F.M.F.</i>
BALANCE DUE - Paid by CHECK <i>Certified/Treas. Cashiers/personal</i> -CASH		<i>3190990</i>
Totals	2386990	2386990

The undersigned hereby approve and accept the above statement as correct and do hereby agree that the correctness of information furnished E. F. Blanchard, Attorney as to insurance, taxes, assessments, principal and interest on assumed deeds of trust, if any, and rents, including water rents, is not to be guaranteed by said attorney. E. F. Blanchard, Attorney assumes no liability for water bills. All figures subject to audit.
 RECEIPT OF A COPY OF THIS STATEMENT
 IS HEREBY ACKNOWLEDGED.
Fannie Mae Faulkner

CERTIFIED A TRUE COPY
 E. F. BLANCHARD
 BY: *Ann T. Peck*

BLANCHARD BUILDING
P. O. BOX 1107
1353 HOLTON LANE
LANGLEY PARK, MD. 20787
429-4700

E. F. BLANCHARD

ATTORNEY AT LAW

SELLER'S SETTLEMENT SHEET

SUITE 203-4, IVYSON MALL
SOUTHERN MARYLAND BANKING & TRUST BUILDING
3731 BRANCH AVENUE
HILLCREST HEIGHTS, MARYLAND 20021
423-8900

Case No. E.F.B. 22876 Date October 30, 1971

NAME HUGH T. PECK, INC.

STREET ADDRESS _____

LOT P/O 10, 11, 12 & 20 BLOCK 11 SECTION _____

SUBDIVISION GIBBS ANDKOSSACK ADDITION TO TAKOMA MONTGOMERY COUNTY, MARYLAND
PARK PRINCE GEORGES COUNTY, MARYLAND
DISTRICT OF COLUMBIA

DEBIT CREDIT

Price Paid for Property		22500-
Commission (M.L.)		
Deposit		
First Trust Note		
Interest on First Trust Note		
Penalty for Pay-Off First Trust		
Escrow		
Second Trust Note		
Interest on Second Trust Note		
Preparation of Release(s), Noting and/or Servicing		
Trustee and Notary Fees-Release(s)		
Recording Deed (s) of Release		
Adjust St. and Co. Taxes, (including FFBC)@		
Town Tax Adjustment @ \$		
Special Assessments		
Insurance, fire and Extended Coverage _____ yrs. @ \$		
Termite Inspection		
Commission %Paid by Seller(Purchaser's Loan)		
Lenders Inspection Fee (Purchaser's Loan)		
Purchaser's Charges, VA Loan, Tax Certificate and Service _____ Conveyancing fees, Deed _____, Trust _____, Notary Fee _____; Noting Fee _____; Settlement Fee _____.		
Water Escrow		
Service Charge		
Transfer to:		
Balance to Seller(s)		
DUE FROM		
Totals	37024-	1400360 37026-

The undersigned hereby approve and accept the above statement as correct and do hereby agree that the correctness of information furnished
 E. F. Blanchard, Attorney as to insurance, taxes, assessments, principal and interest on assumed deeds of trust, if any, and rents, including
 water rents, is not to be guaranteed by said attorney. E. F. Blanchard, Attorney assumes no liability for water bills. All figures subject to audit.

RECEIPT OF A SIGNED COPY OF THIS
 STATEMENT TO BE UPON ADVISORY BOARD

CERTIFIED A TRUE COPY
 E. F. BLANCHARD

RV:

MEMORANDUM

Date: November 9, 1971

TO: Ben Webb
FROM: Jim Crolley
SUBJECT: Fannie Faulkner - 287-9812

These are the transportation costs for travel by Fannie Faulkner, 327 N. Fargo, Portland, Oregon to Washington D. C. (Tokoma Park, Md.) that you requested.

I did not include cab fares and/or limousine service which will vary. We might be able to furnish transportation to the airport on this end if during working hours.

JC:slc

11/15/71 MRS FAULKNER HAS BEEN BOOKED ON UA FLIGHT
NO 149 FOR 8:00 AM - NOV 20. WE HAVE ALSO ARRANGED FOR
HER DOG. CHECK IN TIME IS 7:00 AM.

FRIDAY NIGHT.

2317 N.E. 8

MIR. IDA IVAE HILL

281-3339

281-3339
THANKS

Memo to File: FANNIE FAULKNER

November 9, 1971

TRANSPORTATION COSTS

Portland, Oregon to Washington, D.C.

(Tokoma Park, MD.)

<u>MODE OF TRAVEL</u>	<u>FARE</u>	<u>TRAVEL TIME</u>
Air (UAL) 226-7211	\$155.00 coach	example: 8 am (PST) - 4:48 pm (EST) (35 min. stop - Chicago)
Train (AMTAC) 227-3421	\$125.00 coach (plus meals) \$218.84 sleeper (plus meals)	arrival morning of 3rd day example: 8 am Tues - 9:55 am Fri.
Bus (GREYHOUND)	\$98.35 (plus meals)	3½ days

Auto (OWNER'S CAR) \$248.67
(2763 @ 9¢ mi.)

ARRIVE BLT. F.S.

Ship
FLT NO UA 142

DEPART PDX

8:00 AM

1 STOP

5:05

~~8:25 AM~~

~~2 STOPS.~~

~~6:40~~

AIR FARE

\$155

DOG

24

\$179

MEMORANDUM

Date November 26, 1971

TO: Ben Webb
FROM: Emanuel Site Office
SUBJECT: Release of RHP from Escrow

Escrow Company PIONEER NATIONAL TITLE INSURANCE CO.
Escrow No. 386675
Parcel No. R-8-9
Name FAULKNER, Fannie Mae
Moving Date November 20, 1971

The above client has relocated and does occupy the property which they purchased at Takoma Park, Md.. The City Bureau of Buildings reports that the structure complys with City Housing Regulations.

Please authorize the release of the Replacement Housing Payment in the amount of \$ 14,940.00

Relocation Worker

LEGAL AID SERVICE
MULTNOMAH BAR ASSOCIATION
ALBINA OFFICE

517 N. E. KILLINGSWORTH - 288-6746 - PORTLAND, OREGON 97211

JAY FOLBERG

DIRECTOR

August 9, 1971

RECEIVED

AUG 10 1971

PORTLAND DEVELOPMENT COMMISSION

Portland Development Commission
1700 S. W. Fourth
Portland, Oregon

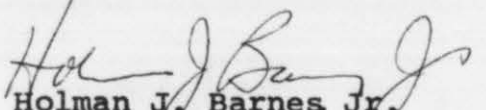
Attn: Ben Webb

Dear Mr. Webb:

With regard to FANNIE MAE FAULKNER, at 327 North Fargo, this is to confirm the information provided by her that her sister in Washington, D. C. is named Katie Woods. Her address is 1425 Morris Road SE, Washington D. C. (Apt. 305). The home in which she is interested is located at 8420 New Hampshire Avenue, in Washington, D. C., and is being offered by Hugh T. Peck, Inc., 7635 New Hampshire Avenue, Langley Park, Virginia. The agent in charge of the sale is apparently Mr. C. E. Pease, whom I believe is in Washington, but it may be Langley Park. At any rate, the phone number is HE4-1700, and his residence phone is 270-3188.

I hope this information is sufficient to allow you to proceed. If not, please contact me immediately.

Very truly yours,


Holman J. Barnes, Jr.
Supervising Attorney

HJB:rv

ALLKNER

August 13, 1971

Hugh T. Peck, Inc.
7635 Newhampshire
Langly Park, Maryland

ATTENTION: Mr. C. E. Pease

Dear Mr. Pease:

This correspondence is in connection with our recent telephone conversation concerning the purchase of a property at 6609 Cockerille Avenue in your city by Mrs. Fannie Faulkner, a displacee from an urban renewal project in Portland.

It is estimated that Mrs. Faulkner will net approximately \$4,925 from the sale of her present property to this Commission. Upon her acquiring and occupying standard housing, this Commission is prepared to disburse to her an additional sum of \$14,940 representing a Replacement Housing Payment. All of our funds will be handled in escrow with Pioneer National Title Insurance Company, 421 S. W. Stark Street, Portland, Oregon, 97204. The escrow officer will be Mrs. Jean Egberg.

Since the Replacement Housing Payment is not payable until after title has passed and the premises occupied, it is recommended that you consider accepting a note secured by the Replacement Housing Payment (\$14,940) which will be in escrow. We are prepared to cause the escrow agent to certify that the funds are in their custody and furnish certified copies of Mrs. Faulkner's and the Commission's letters of instruction authorizing and directing the escrow agent to disburse those funds directly to you upon this Commission receiving evidence that title has passed and the premises are occupied. In this regard, a copy of the closing statement signed by each party will satisfy us that title has passed, and a written statement by any public official testifying to the occupancy will be satisfactory. We would look to you in furnishing this documentation at the appropriate time. Meanwhile, the original copy of a letter from your local building inspector having jurisdiction on code compliance attesting to the fact that the structure meets present codes will constitute meeting the requirement of a standard structure as it applies to the Replacement Housing Payment. It is recommended that you initiate action now to acquire such a statement.

Mr. C. E. Pease
Hugh T. Peck, Inc.

August 13, 1971
Page 2

Since Mrs. Faulkner is not presently prepared to make an earnest money deposit, it is suggested that you prepare an earnest money agreement, together with a conditional note for an amount acceptable to each party. This should be forwarded to Mr. Holman J. Barnes, Legal Aid Service, 517 N. E. Killingsworth, Portland, Oregon, 97211 (telephone 503-288-6746) for his review and legal counsel to Mrs. Faulkner. It is further recommended that you arrange for the necessary loan to Mrs. Faulkner estimated in the amount of \$3,000 or less to accommodate the balance of the purchase price and necessary costs and report the terms and conditions of such loan to Mr. Barnes.

The transaction between Mrs. Faulkner and this Commission is conditioned upon satisfactory arrangements between you and her. Your immediate response will be appreciated.

Upon the closing of our transaction with Mrs. Faulkner she will be in a position to redeem the earnest money note and proceed to your city.

This correspondence is being transmitted via Mr. Barnes for his comments and observations. I am prepared to render continued assistance throughout the transaction.

Respectfully,

Harold D. Hand
Real Estate Supervisor

MDH:d1

Mark



moving with care everywhere

United Van Lines Inc

No. 1 United Drive

Fenton, Missouri 63026

TWX 314-326-1004 • TLX 044-7168

314-326-3100

JANUARY 28, 1972

W STANLEY JONES
PORTLAND DEVELOPMENT COMMISSION SITE OFF
235 N MONROE ST
PORTLAND ORE 97227

RE - SHIPPER FAULKNER
P.O. NO.
DATE OF BILLING 12/29/71
INVOICE NO. 0559003131

GENTLEMEN,

THE INVOICE NOTED ABOVE CONTINUES TO SHOW PAST DUE ON OUR RECORDS.

MAY WE PLEASE HAVE YOUR CHECK, WITHOUT FURTHER DELAY,
FOR \$1,385.70.

PLEASE DISREGARD THIS LETTER IF YOUR CHECK HAS ALREADY BEEN
MAILED. HOWEVER, SHOULD THERE BE ANY REASON THAT PAYMENT HAS
NOT BEEN MADE, PLEASE LET US KNOW.

COLLECTION DEPARTMENT
NATIONAL ACCOUNT DIVISION

BEKINS ESTIMATED COST OF SERVICES

686784

FOR CARRIERS USE ONLY

ADDRESS OF CARRIER 407 N. BDWY 288-5411
 NAME OF SHIPPER MRS. FAULKNER
 ADDRESS 327 N. FARGO PHONE 287-9812
 MOVING FROM SAME
 MOVING TO WASHINGTON, DC.

DATE 8/14/71
 PACKING DATE REQUESTED _____ MOVING DATE REQUESTED _____
 DELIVERY DATE OR PERIOD OF TIME REQUESTED _____
 OBTAIN BILLING AUTH. (CORP.) _____
 CITY _____
 DNP _____ MOS _____ PMTD. _____
 EST. CU. FT. _____

(Based on Tariff No. 143 A MF-I.C.C. No. _____ Section _____
 Transportation: Est. Wt. * 2800 lbs. 2763 miles, @ 24.30 rate per 100 lbs. \$ 680.40
 Additional transportation charges (explain) CONTESTED AREA 14.00
 Pick-up or delivery for storage in transit _____ lbs., @ _____
 Storage in transit _____ lbs., @ _____
 Warehouse handling _____ lbs., @ _____
 Extra pick-up or delivery at _____
 Special servicing of appliances _____
 Hoisting, lowering, or carrying pianos, heavy articles (explain) _____
 Packing and unpacking (see below) _____
 Additional liability charge (for liability on part of carrier in excess of that assumed when its lowest rates are charged) \$ 3000 @ .50 Per 100' 77.15
 Shipment charge 15.00
 Other services (explain) _____
TOTAL ESTIMATED COST 786.55

IMPORTANT NOTICE TO SHIPPER

This estimate covers only the articles and services listed. It is not a warranty or representation that the actual charges will not exceed the amount of the estimate. Common carriers are required by law to collect transportation and other incidental charges computed on the basis of rates shown in their lawfully published tariffs, regardless of prior rate quotations or estimates made by the carrier or its agents. Transportation charges are based upon the weight of the goods transported, and such charges may not generally be determined prior to the time the goods are loaded on the van and weighed.

No guarantee can be made as to the specific dates of pickup or delivery of your shipment, unless you make special arrangements with the carrier for expedited service, for which an additional charge will normally be made.

ESTIMATED COST OF PACKING AND UNPACKING		Quantity	Rate	Amount
BARRELS, DRUMS OR FIBRE CONTAINERS		1	2.00 - 7.00	2.00 - 11.25
BOXES, WOODEN, not over	cu. ft.			
over not over	<u>MIRR</u> cu. ft.	3	5.00 - 1.00	18.00
over not over	cu. ft.			
over not over	cu. ft.			
over not over (See Crates)	cu. ft.			
CARTONS, not over	<u>1.5</u> cu. ft.	1	.75 - 1.75	.50 - 3.00
over not over	<u>6.5</u> cu. ft.	2	.75 - 2.75	.75 - 5.75
over not over	cu. ft.			
over not over	cu. ft.			
USE OF: WARDROBE CARTONS		4	5.00 - 2.00	.25 - 29.00
MATTRESS CARTONS	<u>DBL</u>	2	2.50 - 1.85	.75 - 10.15
CRIB MATTRESS CARTON				
MATTRESS COVER (plastic or paper)				
CRATES, WOODEN				
Gross Measurement of Crates	cu. ft.			
LABOR ADDITIONAL	() man hours @ \$ _____ per hour per man			
TOTAL ESTIMATED PACKING AND UNPACKING COSTS				

REMARKS: 77.15

*NOTICE TO ESTIMATOR: It is mandatory that the total cubic footage shown on the Table of Measurements form be multiplied by not less than SEVEN to determine the total estimated weight. Articles not to be shipped should be indicated by a "check mark" in the column provided on the table of measurements.

If the prospective shipper has not previously been furnished with the 1-page explanatory summary and the full information Statement required by the Interstate Commerce Commission in Rule 176.12, they should be furnished at this time.

(This Estimated Cost of Services form is not to be signed by the shipper.)

Agent or Branch Bekins
 City and State _____ Code _____
 Signature of Estimator DON EAVES
 Title of Estimator 288-5411
 Shipper given "Important Notice to Shippers of Household Goods."
 Shipper given printed statement "General Information for Shippers of Household Goods by Motor Carriers in Interstate or Foreign Commerce."

REV. 9-70

MRS F. FAULKNER

1 FLIGHT

TI 150

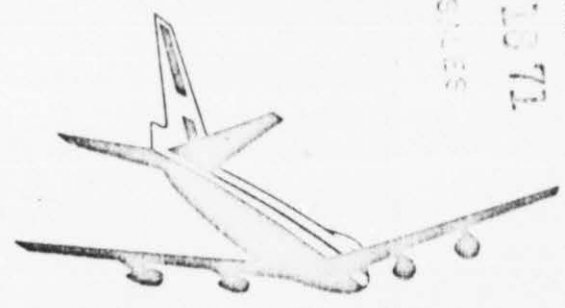
fly the
internally stores
of
Wharfedale

016:153 :005:925

NO SALES

NOV 18 71

UAT
PORTLAND



Partners in travel with Western International Hotels

SEAT

142 Y/20

United

Ticket for:

Mr. D. Webb

Ticket given to Ben Webb 12/18/71.

UNITED AIR LINES, INC. PASSENGER TICKET AND BAGGAGE CHECK
 SUBJECT TO CONDITIONS OF CONTRACT OR PASSENGER'S COUPON
PASSENGER'S COUPON

FOR ISSUING OFFICE ONLY
 AIRLINE FORM 016:153 SERIAL NUMBER 005:925

ENDORSEMENTS

NAME OF PASSENGER *Mrs F. Faulkner* NOT TRANSFERABLE ORIGIN

DESTINATION

ISSUED IN EXCHANGE FOR

TICKET DESIGNATOR/FOUR CODE

GATE AND PLACE OF ORIGINAL ISSUE

FROM	FARE BASIS	CARRIER	FLIGHT/CLASS	DATE	TIME	STATUS	ALLOW.
PORTLAND	Y	UA	142	NOV 20	800 A	OC	
BALTIMORE							

FARE	143.52	TOTAL	55.00	CPN.		TICKET NUMBER	016 153005925 2
TAX	11.48						

CARRIER	FARE CALCULATION

305 DATE AND PLACE OF ISSUE

FORM OF PAYMENT: *Cheque*

IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FROM THE DATE OF ISSUE.

1 large kernel reserved

UTS 1535 NS (EXORT) REV. 10-69 PRINTED IN U.S.A.

PLACE AND DATE OF ISSUE: **PORTLAND NOV 18 7**

AGENT'S SALES: **305**

UNUSUED OR ORIGINAL TICKET

UNUSED COUPONS INVOLUNTARY VOLUNTARY

DENIED BOARDING EXCHANGE TAX EXEMPT

AIRLINE NO. 016 FORM 153 SERIAL NO. 005:925

1020120 ²⁻³/₇₁₀

CHANGE IN CLASS OF SERVICE

FARE BASIS	FLIGHT USED & DATE	BETWEEN	AND
FROM	TO		

REISSUED TICKET (EXCH. ONLY)

AIRLINE NO. FORM SERIAL NO.



PAY *Twenty-four and 00/100* DOLLARS \$ *24.00*

WRITTEN AMOUNT (MAXIMUM \$500)

TO THE ORDER OF

NAME: *Kenne M. Faulkner*

PERMANENT STREET ADDRESS: *61700 SW 4th*

CITY, STATE—ZIP CODE: *Portland, Oregon 97201*

UNITED AIR LINES, INC.
 PASSENGER REFUND ACCOUNT

PAYABLE THROUGH
 Continental Illinois
 National Bank and Trust
 Company of Chicago

Marian Steinger AGENT

⑈ 10 20 1 20 ⑈ ⑆ 0 7 1 0 ⑆ 0 0 0 3 1 ⑆ 2 0 ⑆ 0 0 2 6 1 ⑈

LEGAL AID SERVICE
MULTNOMAH BAR ASSOCIATION
ALBINA OFFICE

JAY FOLBERG

DIRECTOR

517 N. E. KILLINGSWORTH - 88-3746 - PORTLAND, OREGON 97211

RECEIVED

October 29, 1971

NOV 4 1971

PORTLAND DEVELOPMENT COMMISSION

EX. DIR.	
A. DIR.	
D. DIR.	
SP. ASST.	SUB
	ALL

Portland Development Commission
1700 S. W. Fourth
Portland, Oregon 97201

Attn.: Benjamin Webb

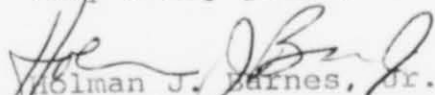
Re: Request for Moving Expenses
Fannie Mae Faulkner

Dear Mr. Webb:

Mrs. Faulkner has advised me that she wishes to make a claim for exceptional moving expenses under provision of Relocation Handbook, Chapter 6, Section 1, Page 8, to justify the cost of her movement to her new house in the Washington, D. C. area. As you know, Mrs. Faulkner will be residing with her sister in the house purchased through Peck Realty Company in Langley Park. She has advised me that she wishes to make the move around the fifteenth of November, 1971, and that her sister has already taken possession of the house.

Mrs. Faulkner wishes to move all of her personal property now present in the house, with the exception of that which is set aside for sale prior to the fifteenth of November. She wishes to be paid for the expense of transporting herself and her said personal property to Washington and believes that her exceptional expenses are justified because of the particular facts in her case. Specifically, Mrs. Faulkner, who has recently been widowed, wishes to share expenses and living in the new home with her sister who is likewise a widow, and believes that their sharing of a household and expenses will result in considerable economy to both of them. I believe that this is reasonable and that because of the better employment market available to Mrs. Faulkner in Washington as a domestic and caterer's assistant, this move would be favored by the economic factors involved. Also, Mrs. Faulkner's family is located in the Washington, D. C. area and she has no known relatives in Oregon. I am personally aware that she is quite alone out here and wishes very greatly to return to the D. C. area. Accordingly, I request that she be fully reimbursed for the cost of transportation of her property and her person to her new home, and I ask that you do everything to see that an exception is granted in this case.

Very truly yours,


Holman J. Barnes, Jr.
Supervising Attorney

HJB/mlw

August 13, 1971

Hugh T. Peck, Inc.
7635 New Hampshire
Langly Park, Maryland

ATTENTION: Mr. C. E. Pease

Dear Mr. Pease:

This correspondence is in connection with our recent telephone conversation concerning the purchase of a property at 6609 Cockerille Avenue in your city by Mrs. Fannie Faulkner, a displacee from an urban renewal project in Portland.

It is estimated that Mrs. Faulkner will net approximately \$4,925 from the sale of her present property to this Commission. Upon her acquiring and occupying standard housing, this Commission is prepared to disburse to her an additional sum of \$14,940 representing a Replacement Housing Payment. All of our funds will be handled in escrow with Pioneer National Title Insurance Company, 421 S. W. Stark Street, Portland, Oregon, 97204. The escrow officer will be Mrs. Jean Egberg.

Since the Replacement Housing Payment is not payable until after title has passed and the premises occupied, it is recommended that you consider accepting a note secured by the Replacement Housing Payment (\$14,940) which will be in escrow. We are prepared to cause the escrow agent to certify that the funds are in their custody and furnish certified copies of Mrs. Faulkner's and the Commission's letters of instruction authorizing and directing the escrow agent to disburse those funds directly to you upon this Commission receiving evidence that title has passed and the premises are occupied. In this regard, a copy of the closing statement signed by each party will satisfy us that title has passed, and a written statement by any public official testifying to the occupancy will be satisfactory. We would look to you in furnishing this documentation at the appropriate time. Meanwhile, the original copy of a letter from your local building inspector having jurisdiction on code compliance attesting to the fact that the structure meets present codes will constitute meeting the requirement of a standard structure as it applies to the Replacement Housing Payment. It is recommended that you initiate action now to acquire such a statement.

Mr. C. E. Pease
Hugh T. Peck, Inc.

August 13, 1971
Page 2

Since Mrs. Faulkner is not presently prepared to make an earnest money deposit, it is suggested that you prepare an earnest money agreement, together with a conditional note for an amount acceptable to each party. This should be forwarded to Mr. Holman J. Barnes, Legal Aid Service, 517 N. E. Killingsworth, Portland, Oregon, 97211 (telephone 503-288-6746) for his review and legal counsel to Mrs. Faulkner. It is further recommended that you arrange for the necessary loan to Mrs. Faulkner estimated in the amount of \$3,000 or less to accommodate the balance of the purchase price and necessary costs and report the terms and conditions of such loan to Mr. Barnes.

The transaction between Mrs. Faulkner and this Commission is conditioned upon satisfactory arrangements between you and her. Your immediate response will be appreciated.

Upon the closing of our transaction with Mrs. Faulkner she will be in a position to redeem the earnest money note and proceed to your city.

This correspondence is being transmitted via Mr. Barnes for his comments and observations. I am prepared to render continued assistance throughout the transaction.

Respectfully,

Harold D. Hand
Real Estate Supervisor

NDH:dl

November 23, 1971,
6609 Lockerille ave.
Takoma Park Maryland.

Dear Mr Webb.

The flight was very nice could not see very much because we had fog all through the Valley was an hour late to take off. At the rest of the way we had snow clouds flying at 37 thousand feet above them but I liked looking at them arrived tired and hungry but safely glad to get home my sister met me at the bus terminal was very glad to see me. I went down today and signed the necessary papers and that's just about all.

will close now.
Yours truly
Fannie Mae Faulkner

Faulkner -

788-1377

I request payment for moving expenses beyond the first 50 miles secondary for the following reasons: that I am a widow & have a limited scope of employment in the domestic field & by ^{my} moving ^{to work} with my sister who is a widow ^{she} could share expenses with me causing a reduction in expense to me.

And that the local agency concurs, that these are reasonable & justified

Cost transporting persons or personal property

Maximum Payment (4 bedroom) 21,940

Acquisition of old house 7,000
RHP 14,940

Purchase Price of new house 22,500

Less RHP 14,940
7,560

Price for old house 7,000.-
Less 2,075 mtg
4,925.

4,925
25,325

HOUSING RESOURCES SURVEY

**RELOCATION ASSISTANCE NEEDS OF RESIDENTS OF
EMANUEL HOSPITAL PROJECT AREA**

(To be filled in for each dwelling unit in the Project Area)

Analyst _____ Date of survey _____ Tabulator _____ Date tabulated _____
 Dwelling Unit No. 8 Structure No. 7 Census Block No. 22 Census Tract No. 22A
 Street Address 327 N Fargo Apartment No. -

A. Status Of Relocation Assistance Needs At This Dwelling Unit:

1. Assistance may be needed, yes , no
2. Why no assistance may be needed
 - a. Vacant
 - b. Will be vacated on the following date _____
 - c. Other reasons _____

widow

B. Residents Of This Dwelling Unit Who May Need Relocation Assistance:

<u>Name</u>	<u>Family relation</u>	<u>Age</u>	<u>Sex</u>	<u>Occupation</u>
1. <u>Faulkner, Fannie</u>	<u>Head of household</u>	<u>62</u>	<u>F</u>	
2. _____				
3. <u>Refused to talk to P.D.C. Rep.</u>				
4. _____				
5. _____				
6. _____				
7. _____				
8. _____				
9. _____				

C. Family Income And Extent Of Travel To Locations Of Employment:

<u>Names of jobholders</u>	<u>Names of employers</u>	<u>Street address where jobs are located</u>	<u>Distance to work</u>
_____	_____	_____	_____
_____	_____	_____	_____

2. Monthly income from jobs and from all other sources received by persons in this household:

<u>Names of persons in this household who have income from any source</u>	<u>Amount of income per month</u>	
	<u>In month before this survey</u>	<u>In an average month during 1970</u>
_____	\$ _____	\$ _____
_____	_____	_____
Total family or household income per month	\$ _____	\$ <u>100.00</u> <i>Estimated</i>

D. Characteristics Of Replacement Housing Needs Expected To Be Sought:

1. Location (indicate approximate cross streets) _____
2. Transportation, number of autos owned _____, use bus _____, walk _____
3. Will rent house _____, apartment _____, expect to pay rent, including utilities, at \$ _____ per mo. (Furniture is owned, yes _____, no _____, stove and refrigerator owned, yes _____, no _____)
4. Will buy house in price range \$ _____, down payment of \$ _____, monthly payment of \$ _____
5. If now buying this house, how much are payments on contract or mortgage monthly \$ _____
6. Size of unit to be sought, number of bedrooms _____, kitchen _____, dining room _____, living room _____, number of bathrooms _____, total sq. ft. in dwelling unit _____
7. Other characteristics W O B I M

HOUSING RESOURCES SURVEY
 To be Filled in For Each Dwelling Unit in All Survey Areas

Date _____

Analyst _____ Surveyed _____ Tabulator _____ Date _____
 Dwelling Unit No. A Structure No. 7 Census Block No. 22 Census Tract No. 22A
 Street Address 327 N Fargo Apartment No. _____
 Legal Description _____

NAME OF OCCUPANT: Fannie Faulkner NAME & ADDRESS OF OWNER: Same NAME & ADDRESS OF PROP. MGR: _____
327 N Fargo _____
 TELEPHONE: 287-1486 TELEPHONE: _____ TELEPHONE: _____
 INTERVIEWED? () Yes () No INTERVIEWED? () Yes () No INTERVIEWED? () Yes () No

I. DESCRIPTION OF STRUCTURE

<u>✓</u> One-family house	No. of units in bldg. _____
___ Apt. in a house	_____
___ Apt. in apt. bldg. or plex	_____
___ Apt. in comm. bldg.	_____
___ Mobile home or trailer	_____

This structure has 1 stories (do not count basement)

II. OCCUPANCY STATUS OF DWELLING UNIT

✓ Owner occupied
 ___ Renter occupied
 ___ Vacant

III. SIZE OF DWELLING UNIT

964 Sq. ft. in first floor (county figure)
1464 Sq. ft. in dwelling unit (if more than 1 floor)
2 Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)
1 No. of bathrooms
4 No. of bedrooms (rooms used mainly for sleeping)

IV. ASSESSOR'S MARKET VALUATION DATA

A. Dates or period of time
1971 Period market value data applicable
4-27-67 Date of last appraisal
1905 Date structure was originally built

B. Market value data for one-family dwelling

	Market value	Computed value per sq. ft.
Land	\$ <u>4000</u>	\$ _____
Improvements	<u>1610</u>	_____
Total	<u>5610</u>	_____

C. Market value data for dwelling unit in a multiple-family structure or commercial bldg.

	Market value for entire structure	Computed value per sq. ft. for this dw. unit
Land	\$ _____	\$ _____
Improvements	_____	_____
Total	_____	_____

_____ Sq. ft. of all d. u. in this structure
 _____ Sq. ft. of commercial space and value of commercial space: Land \$ _____, improvements \$ _____, total \$ _____.

V. RENTAL RATE FOR THIS RENTED UNIT

Monthly average	Cash rent	Utilities	Total paid by renter
Rent	\$ _____	_____	\$ _____
Electricity	_____	\$ _____	_____
Gas	_____	_____	_____
Water	_____	_____	_____
Heat (oil, or other)	_____	_____	_____
Total	\$ _____	\$ _____	\$ _____

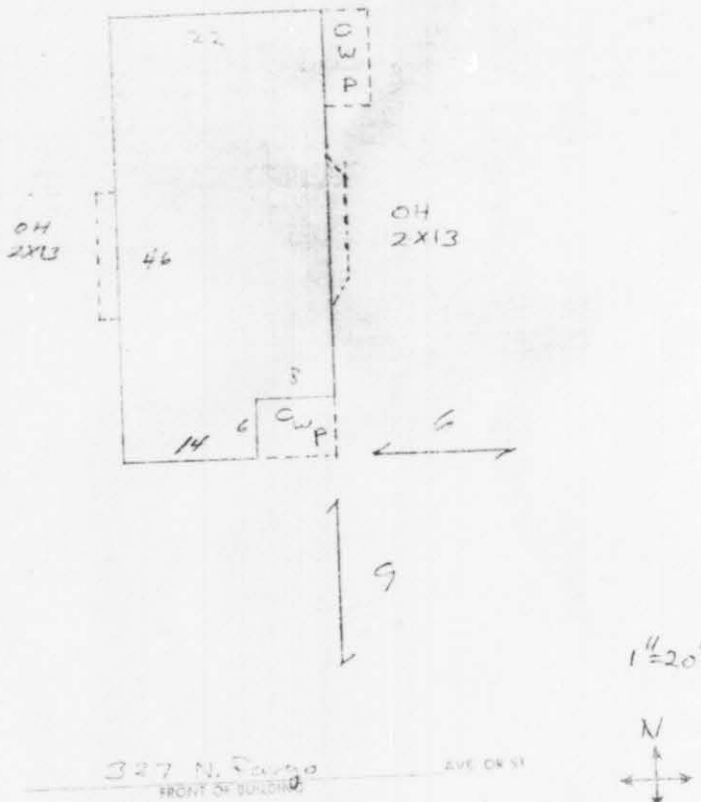
Deposits required of renter
 Advance rent \$ _____, other \$ _____
 Rental information obtained from
 Tenant _____, owner _____, manager _____, or
 estimated from assessor's data _____.

VI. FOR SALE INFORMATION FOR THIS HOUSE THAT IS OCCUPIED BY OWNER OR RENTER

Listed with broker, yes _____, no _____
 Advertised by owner, yes _____, no _____
 Cash asking price \$ _____
 Period house has been for sale, months _____

VII. REMARKS

1 1-71080-2290 LINCOLN LOAN CO
 MAP: 2730 BY FAULKNER, RICHARD
 ZONE: A25
 RATIO: 1401 327 N FARGO ST 97227
 LVY C: 001 PORTLAND, OREGON
 RIVERVIEW SUB LOT BLOCK
 11 8



PROPERTY ADDRESS: 327 N FARGO ST
 PORTLAND

APPEALS:

ASSESS YEAR	MIN RIGHTS	SUMMARY	ASSESSED VALUATION - REAL PROPERTY			SIGN DATE	
			TIMBER	LAND	IMPS		TOTAL
1968				3850	1550	5400	1/20
1971				4000	1610	5610	N.D.

REASON: *Not best land use*
 GROUND: *Very poor soil*

DATE: FEB 23 68
 BY: ANDREWS S. MILLER
 DATE: 1 25 68
 CHECKED: [] REVIEWED: []
 BDDG. COUNT: [] INDEX: []
 RE CHECKED: [] NOTIFIED: []

AND APPRAISAL NO. 68

IDENTIFICATION 2750

3980 1/68 C 3980.13

ADJUSTMENTS

DESCRIPTION	ADJUSTMENTS	IND. VALUE
MONTHLY RENTAL \$		
AREA IMPROVEMENTS		
SIDEWALKS & CURBS		
WATER		
SEWER		
CEILING		

COMPUTATIONS

DESCRIPTION	SIZE OR ACRES	BASIC UNIT VALUE	AUTO ADJUST FACTORS	UNIT VALUE	VALUE
-40x105 @ 20FF	800				800
C. 90+	4320				3888
					3888

SITE ADJUSTMENTS

DESCRIPTION	ADJUSTMENTS	IND. VALUE
ROAD TYPE D.G.P.		
TOPOGRAPHY	2' H.G.	
VIEW		
OTHER		

TOTAL AREA

DESCRIPTION	TOTAL APPR. VALUE	APPR. VALUE	APPR. VALUE	APPR. VALUE	APPR. VALUE
SUB-TOTAL	3888				
TOTAL APPR. VALUE		3888			
10		APPR. VALUE			
15		APPR. VALUE			
19		APPR. VALUE			
19		APPR. VALUE			

ACCOUNT NO. 1-71030-2-20

CLASS 4

ADDRESS 327 N. Fair St.

FOR

PLUMBING FACILITIES

ENTER

INTER

HEAT

FIREPLACE

ATTIC

2ND STY

MISC

MISC

OUTSIDE

DESCRIPTION	QTY	UNIT	PRICE	AMOUNT
PIPE				260
PLUMBING				193
ENTER				230
INTER				12370
HEAT				225
FIREPLACE				1578
ATTIC				
2ND STY				
MISC				
MISC				
OUTSIDE				
TOTAL				1550
SUB				

AREA 9164

REPL. COST 1210

DEPRECIATION 216

TOTAL DEPRECIATED REPLACEMENT COST 1578

ADJUSTMENT

APPR. VALUE 1960

APPR. VALUE 19

APPR. VALUE 19

APPR. VALUE 19

APPR. VALUE 19

REMARKS

APPR. 42767

On January 2, 1971, the President signed the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970. This Act makes significant changes in the relocation payments and assistance that may be provided to persons and business concerns displaced by activities assisted in whole or in part with Federal funds. As you know, the Emanuel Hospital Project is being carried out with assistance from the U. S. Department of Housing and Urban Development (HUD).

In general, the new Act improves and increases relocation payments and assistance that may be made to persons and business concerns displaced on or after January 2, 1971.

Displaced families and individuals may be eligible for either (1) a payment to cover actual reasonable moving expenses or (2) a fixed moving expense allowance not to exceed \$300 plus a dislocation allowance of \$200. In addition, a payment not to exceed \$15,000 is available to assist displaced homeowners in the purchase of a replacement dwelling unit and a payment not to exceed \$4,000 is available to displaced tenants and certain homeowners to assist in the rental of a replacement dwelling unit or, in some cases, for use as a downpayment on the purchase of a replacement dwelling unit. Your special attention is called to the fact that the amounts of payments described above are maximum. The actual amount which you will receive will depend upon your individual circumstances.

Displaced business concerns may be eligible for either (1) a payment to cover actual reasonable moving expenses, direct loss of tangible personal property, and reasonable expenses in searching for a replacement business; or (2) in certain cases, a fixed payment equal to the business concern's average annual net earnings, but not less than \$2,500 nor more than \$10,000.

In addition to these relocation payments, the Act provides for relocation assistance to be provided for those displaced. The objective is to minimize hardships to persons required to relocate and to assure that suitable relocation resources will be available before displacement takes place.

Before any payments may be made under the new Act, HUD must issue the necessary regulations and procedures for making payments. We will continue to make relocation payments and provide relocation assistance in accordance with laws and regulations existing prior to January 2, 1971, until such time as the new regulations and procedures are received.

In the meantime, we have been authorized to make certain payments on an interim basis. Therefore you have the option of either:

1. Accepting an interim relocation payment and filing a revised claim later for any additional amount to which you may be entitled; or
2. Deferring the filing of your claim until the regulations are received which will permit payments to be made.

Please let us know, by checking the appropriate box on the form provided and returning the form to us, the action you wish us to take. We have furnished you with two copies of this form so that you may keep one for your records.

We will be in touch with you again as soon as we have more information regarding our ability to make payment under the new Act. If you have any questions regarding this matter, please get in touch with our Relocation Office. The telephone number is 288-8169.

Sincerely,

Chief of Relocation and
Property Management

Faulkner

Inventory -

5-19-71

est of Housing in Wash DC

235 housing or conventional housing

Average Sale Price for SLD Housing in
Locality - Wash, DC.

2 sister living in Wash - will live with her.

Lost of Property Claim.

Areas - Preferred

Annacostia

Suburbia Md.

(N.W. Morris)

plus 500

1 Bdrm	2 Bdrm	
9046	13980	7000
7000	7000	5000
<hr/>	<hr/>	<hr/>
2046	6980	12000
	5000	

4000 -

21,940

7,000 - 3000

14,940

R E C E I P T

I hereby acknowledge receipt of a copy of the Portland Development
Commission's RELOCATION SERVICES FOR FAMILIES AND INDIVIDUALS.

Fannie Mae Faulkner

date