

	DESCRIPTION	ROLL NO	ODOMETER
PARCEL NO. E-4-7	PAYTON, FRANK 423 N. RUSSELL		
PARCEL NO. R-14-2	PENDERGRAPH, INELL 536 N. MONROE		
PARCEL NO. A-2-4	PENHARLOW, CHERYL N. 3102 N. GANTENBEIN		
PARCEL NO. A-3-8	PEOPLES, RUTH 252 N. COOK		
PARCEL NO. A-2-3	PERKINS, MARY 3146 N. GANTENBEIN		
PARCEL NO. R-10-14	PETERSON, FRED 501 N. MONROE		
PARCEL NO. RS-4-9	POWELL, LUSHIE 7 N. RUSSELL		
PARCEL NO. A-3-12	PRUITT, LAVERNE 248 N. IVY		
PARCEL NO. R-9-11	RADEL, ANNA 3127 N. GANTENBEIN		
PARCEL NO. RS-4-9	ROBERTS, BETTY (DECEASED) 7 N. RUSSELL		
PARCEL NO. RS-3-3	ROBINSON, JAKE 122 N. GRAHAM		
PARCEL NO. A-2-7	SKIPPER, GENERAL S. 3103 N. VANCOUVER		
PARCEL NO. A-3-14	SKOKO, LUCY (DECEASED) 241 N. FARGO		
PARCEL NO. A-3-4	SMITH, AARON J. 222 N. COOK		
PARCEL NO. A-4-3	SMITH, RICHARD DENNIS 232 N. IVY		
PARCEL NO. A-4-3	SMITH, WILLIAM 232 N. IVY		
PARCEL NO. RS 8-3	STEWART, MARY (ESTATE OF) 203 N. STANTON		
PARCEL NO. A-2-2	STITT, WILLIAM D. 3138 N. GANTENBEIN		

RESIDENTIAL RELOCATION RECORD

CLIENT'S NAME PEOPLES, Ruth RELOCATION ADVISOR CD and AC
 ADDRESS 252 N. Cook PHONE 288-2208 PROJECT NAME Emanuel ORE. R-20
 SEX F ETHN black VETERAN _____ AGE 53 PARCEL NO. A-3-8
 MARITAL STATUS _____ TENURE tenant
 DISABILITY _____ INDIV X FAMILY _____
 ELIGIBLE FOR: PUBLIC HOUSING X FHA 235 _____
 RENT SUPPLEMENT _____ OTHER _____
 INITIAL INTERVIEW 525-97 1-19-71 DATE INFO PAMPHLET DELIVERED _____
 NOTICE TO MOVE _____ DATES EFFECTIVE _____ EXPIRATION DATE _____
 NOTIFY IN CASE OF EMERGENCY _____

DATE ON SITE:	<u>about 3 years</u>
INITIATION OF NEGOTIATIONS:	<u>5-14-71</u>
DATE OF ACQUISITION:	<u>12-16-71</u>
	<u>12-30-71</u>

ECONOMIC DATA

Employer on welfare as of 8/15/71 \$ _____
 Address _____
 MCW _____ 87.50
 Social Security _____
 Pension _____
 Other _____
 TOTAL MONTHLY INCOME \$ 87.50

FAMILY COMPOSITION

Name	Relation	Age

DWELLING UNIT FROM WHICH RELOCATED

		S	SS
Subsidized Sales	Single Family		<u>X</u>
Subsidized Rental	Multiple Family		
Public Housing	Duplex		
Private Rental	Mobile Home	<u>X</u>	
Private Sales			

Age of Structure 1895 No. Rooms 5
 No. Bedrooms 2 Furn. Unfurn
 Utilities \$ _____
 Monthly Payments (Rent) \$ _____
 Acquisition Price \$ _____
 Taxes \$ _____ Equity \$ _____
 Liens \$ _____

Size of Habitable Area 690+

HOUSING REFERRALS

Address	Bedrooms

AGENCY REFERRALS

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

over

Agencies

AGENCY ACTION:	REASONS:
Appeals	<i>Community Care</i>
Evicted	<i>Muti Service Center</i>
Refused Assistance	<i>Albina Comm. Action Program</i>
Address Unknown (tracing)	<i>Salvation Army</i>
Other (death, etc.)	<i>Model Cities</i>

TEMPORARY RELOCATION

Within Project	<input type="checkbox"/>
Outside Project	<input type="checkbox"/>

Date Moved In _____
 Address _____
 Reason _____

REPLACEMENT DWELLING UNIT

Client Referred _____ LPA Referred _____
 Address 1312 N. E. Prescott Phone none Date of Move 9/29/71

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

Furnished _____ Unfurnished X Number of Rooms 4 Number of Bedrooms 1 Habitable Area _____
 Utilities \$ _____ Monthly Payments (Rent) \$ 3.75 Purchase Price \$ _____
 Age of Structure: HAP Taxes \$ _____ Equity \$ _____ Distance Moved Away _____
 Name of Moving Company _____ Name of Realtor _____

BENEFITS RECEIVED

TOTAL: \$4,000.00

Type	Ck #	Date	Amount
RHP			\$
TACO (Rental)	225 EH	12/31/71	\$ 1,000.00
TACO (Rental)	646 EH	1-3-73	\$ 1,000.00
TACO (Rental)			\$
TACO (Rental)			\$
TACO (Sales)			\$
Fixed Moving	27049 G	9/29/71	\$ 380.00
Actual Move			\$
Storage	27281 G	10/11/71	\$ 20.00
Incidental			\$
Interest			\$

Purchase Price \$ _____
 Down Payment \$ _____
 RHP \$ _____
 Total Down - \$ _____
 Total Mortgage \$ _____

TOTAL BENEFITS RECEIVED \$ _____

REALTOR: _____ ESCROW CO. _____ OFFICER _____

INTERVIEW REGISTER

Date		Relocation Worker
1/15/71	<u>FLYER</u> : delivered. No contact made. Got info from owner.	
1/19/71	Talked to Mrs. Peoples about housing. She felt that she would be interested in buying a house. I made an appointment to take her out looking 5/20/71.	
5/25/71	Went to Mrs. Peoples and to Legal Aid. Mrs. Peoples listened to the attorney try to explain what she might get to relocate under the new bill. I told Mrs. Peoples that we are operating under the old law until the new law is interpreted. Her ARP payment will not give her enough money to buy a house. She is thinking more about renting.	
5/28/71	Mrs. Peoples wants to move. The house she lives in belongs to Mr. Payne who has been in to negotiate his option. Mrs. Peoples is experiencing a hardship because she cannot use her furniture and other goods and assets are boarded up in Mr. Paynes house. The apartment caught fire several months ago. Mrs. Peoples, at this time, is nervous, does not sleep well since she had the fire. She is living with some friends. Called Claire Peoples to get food (288-8321).	
	Talked to Mrs. Peoples supervisor and he felt that she did not want her job. She has a very bad work record. Mrs. Peoples asked me to call to explain her problem. Introduced Mrs. Peoples to Mrs. Hart, Albina Real Estate, to go look at house. She lived at the present address since September 1970. She has lived in the immediate area for 6 to 7 years. Because of her income we felt that she would not qualify for public housing.	
6/9/71	Mrs. Peoples came in and said she had found a place to move and that she put \$55.00 down on the apartment. We did not have a chance to inspect it and see if it was substandard or not. She said she would move anyway.	
6/10/71	Had an appointment with Mrs. Peoples at 9:00 a.m. and Mr. Stewart was available to help her move, however, Mrs. Peoples did not keep or appointment or call.	
6/16/71	Mr. Norland called from Legal Aid to talk and make demands about Mrs. Peoples. He said that he has affidavits to show that we had not informed Mrs. Peoples about her option under the new law for buying a house. Indicated that we had explained to Mrs. Peoples her options and benefits to which she was entitled according to the new law and the old. After much discussion as to what we could do now under the new law according to Mr. Norland's interpretation and reference to some house c committee report, it was agreed that all Mr. Norland wanted us to do at this time, was to provide Mrs. Peoples with two or three referrals of sales housing between the price of \$6,000 to \$10,000. Mr. Norland refused to indicate where Mrs. Peoples is now or how we could contact her, although he maintained he knew where she was, which was not at the apartment, he said, that she supposedly rented. Later discussion with BW indicated that we should be careful about providing too much confidential information about Mrs. Peoples to Mr. Norland when we had no indication from Mrs. Peoples that he was authorized to represent her.	
6/22/71	In conversation with Mr. Norland, he indicated that he wanted an appointment for Mrs. Peoples to look at three or four houses that she could buy.	

INTERVIEW REGISTER

Date

Relocation
Worker

I told him I would be glad to, if he would bring Mrs. Peoples or tell us where she could be found. I have gotten no reply. Mr. Norland wanted to know what benefits she would get. I told him I had no authorization to give him that information except in the company of Mrs. Peoples or by written authorization in our file. I suggested that he write to PDC c/o Relocation Department, Attention Ben Webb, pinpointing his concern and questions he wanted answered for Mrs. Peoples, if he felt that a meeting would not solve Mrs. Peoples problems.

He mentioned that her employer would take her back if she would get settled - but that she wasn't working at this time. She had gotten some help from welfare.

Received letter (Xerox copy) stuck in our door, without envelope and signed by Mr. Norland and Doug Green (see attached).

Unless we can establish Mrs. Peoples' whereabouts, it is very hard to help her. Mr. Norland has indicated that she moves from one place to another and that he knows her present address. In the interest of helping Mrs. Peoples it seems best that we find out where she moved so that we can inspect to see if the housing is standard or sub-standard. I need to know how much of the furniture was actually moved so that I can process her moving claim for relocation.

Under the old relocation act she would not get any ARP because she has no family. We hope that she would get something more as additional relocation benefit under the new relocation act. She has indicated that she would take a partial payment now and the balance when the new Act is enforced.

Mrs. Hart of Albina Real Estate has been working with Mrs. Peoples: first, to try and find a rental for her. This started May 29. - Could not find her because she was moving around from place to place. Jim Norland called Mrs. Hart. He gave her a number where she could find Mrs. Peoples (around 7/2/71). She and Mrs. Peoples met Mrs. Norland and Barnes. After meeting, legal aid, Mrs. Hart wrote earnest money and took it to Ben Webb (has not seen her). After that Mrs. Hart brought Earnest money and Mrs. Peoples back to her office to get credit information and other mortgage application. Then the broker sent earnest money for acceptance (has not returned as yet, nor has credit report). Mrs. Peoples has not come in and paid for credit report. Mrs. Hart has paid.

7/29/71

Mr. Hartley brought earnest money, credit report, appraisal (FHA), for house at 4635 N. Kerby for Mrs. Peoples to buy.

9/8

Mrs. Peoples paid for an apartment on N.E. Ivy in July (\$55 first month's rent) but lost her job and could not keep it- never moved in. She told Mrs. Warren of EDPA about her problem but neglected to tell Chet Daniels. I assume this was the big mix-up in losing contact with Mrs. Peoples.

Mrs. Peoples has applied for social security or else asked for her social security back from the Post Office. She says she also will get retirement pay but this must be only the amount she paid in for a couple of months. She is getting welfare now at about \$150 a month. She wants to go back to work as a hotel maid.

9/8

Mrs. Hart brought Mrs. Peoples into Ben's office today. We concluded Aftersome discussion that since Mrs. Peoples lost her job, she could not

AC

INTERVIEW REGISTER

Date

Relocation
Worker

qualify for a mortgage loan. Mrs. Hart will put the 4655 N. Kerby property back on the market.

Mrs. Peoples had a place in mind on the corner of Kerby and Mason that she wants to check out before she looks at any HAP units.

9/9

Mrs. Peoples called to say the above apartment does not have a stove and refrigerator and therefore, she would not take it. Anne will look at HAP and rent supplement.

Mrs. Peoples is concerned about her goods stored at 250 N. Cook. A window is broken and she says the rats are eating away at her goods.

9/10

Anne and Mrs. Peoples went to HAP and were told that she does not qualify on the grounds that she was under 62 years and not disabled. Mabel Jackson said that single displacees do not qualify for HAP unless they are handicapped or 100% disabled.

Mrs. Peoples was very upset and started talking under her breath about all the injustices done to people - she kept it up for some time. I told her that I would see if her doctor (Mintz) could qualify her as 100% disabled, though I doubt it. I said I thought we could store her things in a better location than 250 N. Cook.

She gave me some string beans she had picked that day in the field. She is doing quite a little canning now. I said I'd trade and give her some of my jam and apricots.

9/13

Ben said that HAP had agreed to qualify single, non-elderly, non-disabled displacees at their most recent Board meeting. He called to confirm with Helen Benjamin, which she so confirmed. I will try to get Ruth Dury of HAP to okay Ruth Peoples before I do anything else.

Ruth Drury okayed Mrs. Peoples as a displacee over the phone. Anne will establish file for Mrs. Peoples at HAP. She prefers to wait for a unit in the NE, though now are available now.

9/14-16

Conferences and Anne sick.

9/17

Took Mrs. Peoples to HAP. One bedroom unit at 13th and Prescott should be ready in two or three weeks. Great location for her for under \$20, including utilities.

Mrs. Peoples is very upset about the house on 258 N. Cook being broken into. PDC does not own it so E. Wiley says we can't board it up. I hesitate to call the owner since Mrs. Peoples has not paid rent there for two or three months.

Mrs. Peoples cried on the way to and from HAP. She very little sleep the night before because a neighbor had called at 4 a.m. to tell her someone had broken into 250 N. Cook. She was unsteady on her feet.

She did understand that a unit would be available in two or three weeks. this is fine with her. Jim Barnes agreed that she should not pay to have her goods stored elsewhere, but she should leave them at Cook and risk a break in since her dislocation allowance and fixed payment can replace most of what might get damaged. If worse comes to worse, Anne can probably find a church who would store her things at no cost.

INTERVIEW REGISTER

Date

Relocation
Worker

Jim Barnes suggested we call Mr. Payne's (owner of 250 N. Cook) attorney, Frank Hagesen at 227-3711 and ask him to board up the property. Mr. Payne told Jim he had boarded it up (one 2 X 4 on the basement door and three basement windows boarded up!)

9/20

Note on Anne's desk from Jim Barnes to the effect that Mrs. Peoples had all her goods stolen last night. Anne will try and find her to determine the extent of the loss. Stan says we have a table and chairs now and will try to find a bed.

9/21

I took Mrs. Peoples down to welfare to get an emergency grant but the general assistance program has no such coverage. We did get groceries at the Sunshine Division (police 38 N. E. Russell) which I am hoping will appease her landlady who thinks she should be charging Mrs. Peoples \$50 instead of \$40.

Mrs. Peoples had all of her things from Cook which were not stolen moved into 3116 N. Williams. Two men helped move her and she is concerned that they were not paid. However, Mrs. Peoples could not give a definite reason for needing money when her service worker contacted her. I feel that she is not used to the \$87.85 monthly income that she cannot stretch it far enough, and it runs out at the end of the month. Mrs. Peoples was very upset and could not tell me exactly what was stolen or the extent of her loss other than the "clothes off her bed", most of her kitchenware, and some of her clothes. I talked to Jim Barnes who is wondering if she can't get reimbursed for some of her loss. Anne is checking.

10/1/71

Mrs. Peoples moved into her new one bedroom HAP apartment at 1312 N.E. Prescott on September 29, 1971. Glory! She received her \$380 check from us on the same day. On the way down to HAP, she cashed it at 1st National on Broadway and put \$300 into her savings account. She paid \$20 security deposit on her apartment, \$.38 rent for Sept., \$3.75 rent for October, \$2 key deposit. The apartment is very nice, freshly painted, cleaned wood floors, nice kitchen with stove and refrigerator. She will pay her own electric bill (includes electric heat) and garbage service.

Mrs. Peoples arranged for her friends to move her belongings over to the apartment and will pay them something out of the cash she had that day.

Sent out form for storage bill from Mrs. McGee for storing Mrs. Peoples things at 3116 N. Williams. We will pay Mrs. McGee directly.

This should take care of things. However, there is a remote possibility that she can get a rental assistance payment even though she is in public housing. The regulations seem incomplete on this point. Am waiting for clarification from HUD.

Will send memo to Jim Barnes on what has happened in Mrs. Peoples case. If he feels she should be compensated for loss of property from her goods at 250 N. Cook, he will have to file claim. We have no such provisions under the new law to pay for loss of property. Memo copy is in the file.

10/12

Check issued to Mrs. McGee for \$20 storing Mrs. Peoples goods. Jim McIntosh delivered personally.

INTERVIEW REGISTER

Relocation
Worker

Date

11/12

Letter of TACO claim sent with claim for signature.

12/15

Another letter of TACO claim for sign. sent - no response to previous.

12-14-73

Claim filed and payment made for 3rd. TACO. Client picked up warrant #868 EH for \$1,000 and signed for check.

AG

11-25-74

Claim filed for 4th and final TACO payment for Ruth Peoples.

11/27/74

Received claim warrant NO. 988 EH for move from 252 N. Cook (Parcel A 3-8) in the amount of \$1,000 payable to Ruth Peoples at 1312 N.E. Prescott H.A.P.

12/2/74

Delivered check warrant No. 988 EH to Ruth Peoples. Signature of client on receipt of check. This was the 4th and final payment check therefore the case is closed.

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 225 EH

DATE December 31, 1971

PAY TO **Ruth M. Peoples**

\$ 1,000.00

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
		Reimbursement per Claim for RHP for Tenants filed. 250 N. Cook (Parcel A-3-8). Total approved \$4,000.00 1st Annual Payment	<u>\$1,000.00</u>

Account Distribution

NO.	TITLE	AMOUNT
E 1501	Relocation Payments (RHP) (EH)	\$1,000.00

AC

AD

January 3, 1972

Mrs. Ruth M. Peoples
1312 N. E. Prescott
Portland, Oregon 97211

Dear Mrs. Peoples:

Enclosed you will find our Warrant No. 225 EM in the amount of \$1,000.

This represents the first of four annual installments of the Rental Assistance Payment to which you are entitled as a result of your displacement from 250 N. Cook.

To remain eligible for this payment over the next three years, you must continue to occupy standard housing.

Very truly yours,

Benjamin C. Vally
Chief of Relocation and
Property Management

BCJ/AG:ch
Enclosure

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 646 EH

DATE January 3, 19 73

PAY TO **Ruth M. Peoples**

\$1,000.00

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
		Reimbursement per claim for RHP for Tenants filed. Move from 250 N. Cook (Parcel A-3-8). Total approved \$4,000.00 2nd annual payment <i>Ruth M. Peoples</i> 1-5-72 (	<u>\$1,000.00</u>

Account Distribution

NO. TITLE AMOUNT

0600 E60 901

RELOCATION PAYMENT

Project: Emanuel Parcel: A-3-8

Payable to: Ruth M. Peoples

Amount

For: <u> </u> RHP for Homeowners	\$	<u> </u>
<u> </u> Incidental Expenses for Homeowners (if separate claim)	\$	<u> </u>
<u> / </u> RHP for Tenants & Certain Others:		
Rental: Total approved \$ <u>4,000.00</u> ; Annual amount.	\$	<u>1,000.00</u>
or Purchase:	\$	<u> </u>
<u> </u> Fixed Moving Payment	\$	<u> </u>
<u> </u> Dislocation Allowance.	\$	<u> </u>
<u> </u> Actual Moving Costs.	\$	<u> </u>
<u> </u> Storage Costs (if separate claim).	\$	<u> </u>
<u> </u> Business: Moving Expenses.	\$	<u> </u>
<u> </u> Business: In Lieu Payment.	\$	<u> </u>
<u> </u> Business: Storage Costs.	\$	<u> </u>
<u> </u> Business: Loss of Property	\$	<u> </u>
<u> </u> Business: Searching Expenses	\$	<u> </u>

Name of Client Ruth M. Peoples Less - \$ *

Move from 250 N. Cook Total \$ 1,000.00

Accounting: Indicate symbol & Acct. No.
 Relocation Payment; Project Cost * ()

mail payment

NOTICE OF RHP-TACO YEARLY PAYMENT

TO: Jim Crowley
(Relocation Advisor)

DATE December 18, 1972

FROM: Benjamin C. Webb, Chief of Relocation & Property Management

RE: Ruth Peoples
(Displacee)

1312 N.E. Prescott
(Address)

No. 2
(annual payment)

\$1,000.00
(amount)

12/31/72
(date due)

Please contact the above displacee and inspect his present dwelling unit. Return the duplicate copy of this form together with a copy of the original claim form and a copy of the inspection.

Present Address: 1312 NE Prescott

Date Inspected: _____ Condition: Standard _____ Substandard

If substandard: (1) Date reinspected and found standard _____

or (2) Displacee notified of ineligibility: _____ yes _____ no

Comments: Same apt she's lived in since she moved from this project.

SIGNED: Ruth M. Peoples
(Displacee)

SIGNED: James B. Crowley
(Relocation Advisor)

DATE: _____

DATE: 12-28-72

TO: Bob Douglas

DATE: _____

FROM: _____

The above subject property has been inspected and found standard. In compliance with P.L. 91-646 please make a check payable as follows:

TO: Ruth M. Peoples

PROJECT: Emanuel

FOR: 2nd Annual Payment

AMOUNT: 1000.00

SIGNED: James B. Crowley

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
PORTLAND, OREGON 97201

Nº

868

EH

DATE December 12, 1973

\$ 1,000.00

PAY TO **Ruth Peoples**

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 per Claim for RMP for Tenants filed. Move from 252 N. Cook (Parcel A-3-8).	
		Total approved 3rd annual payment	\$4,000.00
			\$1,000.00
<p><i>Ruth M. Peoples</i> 12-14-73</p>			

Account Distribution

NO. TITLE

AMOUNT

RELOCATION PAYMENT

PROJECT: Emanuel R-20

PARCEL: A-3-8

PAYABLE TO: Ruth Peoples

For: <input type="checkbox"/>	RHP for Homeowners	.....	\$	_____
<input type="checkbox"/>	Incidental Expenses for Homeowners or Tenants	.....	\$	_____
<input checked="" type="checkbox"/>	RHP - Tenants & Certain Others - Rental: Total approved \$4000; Annual amount	.....	\$	<u>1000.</u>
<input type="checkbox"/>	RHP - Tenants & Certain Others - Downpayment	.....	\$	_____
<input type="checkbox"/>	Settlement Costs (on acquisition by LPA only)	.....	\$	_____
<input type="checkbox"/>	Interest Expense	.....	\$	_____
<input type="checkbox"/>	Fixed Moving Payment	.....	\$	_____
<input type="checkbox"/>	Dislocation Allowance	.....	\$	_____
<input type="checkbox"/>	Actual Moving Costs	.....	\$	_____
<input type="checkbox"/>	Storage Costs	.....	\$	_____
<input type="checkbox"/>	Business: Moving Expenses	.....	\$	_____
<input type="checkbox"/>	Business: In Lieu Payment	.....	\$	_____
<input type="checkbox"/>	Business: Storage Costs	.....	\$	_____
<input type="checkbox"/>	Business: Loss of Property	.....	\$	_____
<input type="checkbox"/>	Business: Searching Expenses	.....	\$	_____

Name of Client Ruth Peoples Family Less - \$ _____ *

Move from 252 N. Cook Individual Total \$1000.

Accounting: Indicate symbol and Accounting No. _____ Relocation Payment; _____ Project Cost *(_____)

0600 E60 901

[Handwritten signature]

NOTICE OF RHP-TACO YEARLY PAYMENT

TO: Jim Crolley (Relocation Advisor) DATE November 23, 1973

FROM: Benjamin C. Webb, Chief of Relocation & Property Management

RE: Ruth Peoples (Emanuel) 1312 N.E. Prescott
(Displacee) (Address)

No. 3rd \$ 1,000 12/29/73
(annual payment) (amount) (date due)

Please contact the above displacee and inspect his present dwelling unit. Return the duplicate copy of this form together with a copy of the original claim form and a copy of the inspection.

Present Address: 1312 N.E. Prescott

Date Inspected: _____ Condition: Standard Substandard

If substandard: (1) Date reinspected and found standard _____

or (2) Displacee notified of ineligibility: yes no

Comments: Displacee remains in same location
As of last payment. HAD

SIGNED: Ruth Peoples (Displacee) SIGNED: [Signature] (Relocation Advisor)

DATE: 12-6-73 DATE: 12/16/73

TO: Bob Douglas DATE: 12/17/73

FROM: Alma Gordon

The above subject property has been inspected and found standard. In compliance with P.L. 91-646 please make a check payable as follows:

TO: Ruth Peoples

PROJECT: Emanuel B-20

FOR: 3rd Annual RHP TACO Payment

AMOUNT: \$1000



SIGNED: Alma Gordon

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

N^o 988 EH

DATE November 27, 1974

PAY TO **Ruth Peoples**

\$ 1,000.00

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
		Reimbursement per Claim for RHP for Tenants filed. Move from 252 N. Cook (Parcel A 3-8). Total approved \$4,000.00 4th and final payment \$1,000.00	
Received by <i>Ruth Peoples</i> 12/2/74			

Account Distribution

NO. _____ TITLE _____ AMOUNT _____

RELOCATION PAYMENT

PROJECT: Emanuel K-20

PARCEL: A 3-8

PAYABLE TO: Ruth Peoples

For: <input type="checkbox"/>	RHP for Homeowners	\$	_____
<input type="checkbox"/>	Incidental Expenses for Homeowners or Tenants.	\$	_____
<input checked="" type="checkbox"/>	RHP - Tenants & Certain Others - Rental: Total approved \$4000; Annual amount \$1000.	\$	_____
<input type="checkbox"/>	RHP - Tenants & Certain Others - Downpayment	\$	_____
<input type="checkbox"/>	Settlement Costs (on acquisition by LPA only).	\$	_____
<input type="checkbox"/>	Interest Expense	\$	_____
<input type="checkbox"/>	Fixed Moving Payment	\$	_____
<input type="checkbox"/>	Dislocation Allowance.	\$	_____
<input type="checkbox"/>	Actual Moving Costs.	\$	_____
<input type="checkbox"/>	Storage Costs.	\$	_____
<input type="checkbox"/>	Business: Moving Expenses.	\$	_____
<input type="checkbox"/>	Business: In Lieu Payment.	\$	_____
<input type="checkbox"/>	Business: Storage Costs.	\$	_____
<input type="checkbox"/>	Business: Loss of Property	\$	_____
<input type="checkbox"/>	Business: Searching Expenses	\$	_____

Name of Client Ruth Peoples Family Less - \$ _____ *

Move from 252 N. Cook Individual Total \$ 1000.

Accounting: Indicate symbol and Accounting No.
_____ Relocation Payment; _____ Project Cost *(_____)

ok jme

0600 x10 901

NOTICE OF RHP-TACO YEARLY PAYMENT

TO: Jim Crolley (Relocation Advisor) DATE November 20, 1974

FROM: Benjamin C. Webb, Chief of Relocation & Property Management

RE: Ruth Peoples (Emanuel) (Displacee) 1312 N.E. Prescott (Address)

No. 4th & final (annual payment) \$ 1,000.00 (amount) December 1974 (date due)

Please contact the above displacee and inspect his present dwelling unit. Return the duplicate copy of this form together with a copy of the original claim form and a copy of the inspection.

Present Address: 1312 N.E. Prescott

Date Inspected: HAP Condition: Standard Substandard

If substandard: (1) Date reinspected and found standard _____

or (2) Displacee notified of ineligibility: yes no

Comments: Mrs Peoples remains in same location as of previous payments.

SIGNED: Ruth Peoples (Displacee) SIGNED: Alma Gordon (Relocation Advisor)

DATE: 11/25/74 DATE: 11/25/74

TO: Bob Douglas DATE: 11/26/74

FROM: Alma Gordon

The above subject property has been inspected and found standard. In compliance with P.L. 91-646 please make a check payable as follows:

TO: Ruth Peoples

PROJECT: Emanuel #20

FOR: 4th & final payment

AMOUNT: \$1000.

[Handwritten initials]

SIGNED: Alma Gordon

**GUIDEFORM DETERMINATION OF ELIGIBILITY FOR REPLACEMENT
HOUSING PAYMENT FOR TENANTS AND CERTAIN OTHERS**

Name of Claimant Ruth M. Peoples

Name of Local Agency Portland Development Commission

1. Did the claimant rent or own the dwelling at the time of acquisition? Yes No

Tenant's initial date of rental: 10/70
Month-Day-Year

Date of Acquisition: _____
Month-Day-Year

Owner-Occupant's initial date of Ownership: _____
Month-Day-Year

2. Did the claimant rent or own the dwelling at least 90 days prior to the initiation of negotiations? Yes No.

Date of Rental or Purchase: 10/1/70
Month-Day-Year

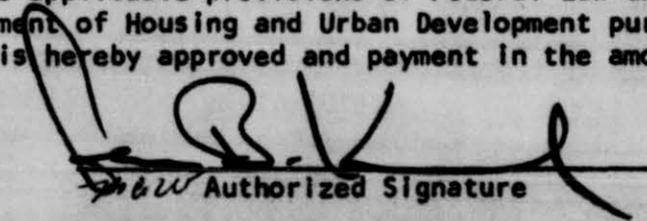
Date of Initiation of Negotiations: 5/14/71
Month-Day-Year

3. Has the replacement housing been inspected and found to be standard? (Attach a copy of dwelling inspection record or, if the claimant moved outside the locality, attach the report obtained from the claimant.) Yes No
Date previously substandard dwelling was inspected and found to be standard: _____
Month-Day-Year

4. **CERTIFICATION OF LOCAL AGENCY**

This is to certify that, where required, the property occupied by the claimant has been inspected. 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 \$ 4,000.00 is authorized.

12-30-71
Date


Authorized Signature

5. **RECORD OF PAYMENTS**

a. Claimant moved to rental unit

(1) Lump-sum payment

(2) Annual payment

1st Year \$1,000

2nd Year

3rd Year

4th Year

	<u>Date of Payment</u>	<u>Check Number</u>	<u>Amount</u>
	_____	_____	\$ _____
	<u>12/31/71</u>	<u>225 EH</u>	\$ <u>1,000.00</u>
	<u>1/3/73</u>	<u>646 EH</u>	<u>1000.00</u>
	<u>11/23/73</u>	<u>868 EH</u>	<u>1000.00</u>
	<u>11-27-74</u>	<u>988 EH</u>	<u>1000.00</u>

b. Claimant moved to unit he purchased

c. Homeowner temporarily displaced

CLAIM FOR REPLACEMENT HOUSING PAYMENT
FOR TENANTS AND CERTAIN OTHERS

NAME, ADDRESS, AND ZIP CODE OF DISPLACING AGENCY: PROJECT NAME (if applicable)
Portland Development Commission Emanuel Hospital Project
1700 S.W. Fourth Avenue
Portland, Oregon 97201 PROJECT NUMBER: ORE. R-20

INSTRUCTIONS: Complete all applicable items and sign certification in Blank 6. 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. Omit Block 4 if you have moved into a rental unit. Omit Block 3 if you have purchased and occupied a dwelling unit. Complete only Blocks 1 and 5 if you are a homeowner temporarily displaced because of code enforcement or voluntary rehabilitation.

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 CLAIMANT

Ruth M. Peoples

Family Individual

2. DWELLING UNIT FROM WHICH YOU MOVED

PARCEL NO. A-3-8

a. Address: 250 N. Cook, Portland 97227

d. Monthly rental: \$ 75.00

b. Apartment or room number: _____

e. Date you moved out of this dwelling: 9/29/71

c. Number of bedrooms: 2

Month-Day-Year

3. DWELLING UNIT TO WHICH YOU MOVED (RENTAL)

a. Address (include ZIP Code): 1312 N.E. Prescott, Portland, Oregon 97211

d. Monthly rental: \$ 3.75

b. Apartment or room number: _____

e. Date you moved into this dwelling: 9/29/71

c. Number of bedrooms: 1

Month-Day-Year

4. DWELLING UNIT TO WHICH YOU MOVED (PURCHASE)

a. Address (include ZIP Code): _____

d. Incidental expenses (total from table on next page): \$ _____

b. Number of bedrooms: _____

e. Date you purchased this dwelling: _____

c. Downpayment: \$ _____

5. INFORMATION IN SUPPORT OF CLAIM OF HOMEOWNER TEMPORARILY DISPLACED BECAUSE OF CODE ENFORCEMENT OR VOLUNTARY REHABILITATION

a. Address of dwelling unit from which you moved: _____

d. Monthly rental for temporary unit: \$ _____

b. Address of dwelling unit to which you moved (include ZIP code): _____

e. Will you require temporary housing for more than 3 months?
Yes No

c. Date of move: _____

Month-Day-Year

If "Yes", total number of months you will require temporary housing: _____ months

6. I submit this information in support of a claim for a Replacement Housing Payment under Section 204 of P.L. 91-646, and I certify under the penalties and provisions of U.S.C. Title 18, Section 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, Section 1001, and any other applicable law, falsification of any item submitted herewith may result in forfeiture of the entire claim.

12-29-71
Date

Ruth M. [Signature]
Signature of Claimant (s)

Complete the following table if you have incurred incidental expenses in connection with the purchase of your replacement dwelling:

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	\$	\$	\$ <u>1/</u>	\$

1/ Enter this amount in Block 4, Line d.

Listing of enclosed documents in support of amounts entered in Column (d) above: Documentation must be provided to support any claim for incurred costs.

WORKSHEET FOR COMPUTATION OF REPLACEMENT HOUSING
PAYMENT FOR TENANTS AND CERTAIN OTHERS

NAME AND ADDRESS OF CLAIMANT:

Ruth M. Peoples
1312 NE Prescott - ~~not address~~
Portland 97211

COMPUTATION PREPARED BY

Anne Cathcart
Name
11-2-71
Date

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 Block A, B or C, as applicable.

C. COMPUTATION OF RENTAL ASSISTANCE PAYMENT FOR CLAIMANT MOVED TO RENTAL UNIT

Required Information

1. Monthly gross rental for comparable unit \$ 128.35
(Cost based on: Schedule 2 bedroom.
 Comparative
 Other
2. Base monthly rental for claimant's former dwelling \$ 20.78
or 25% of Income, whichever is less.

Computation

3. Line 1 minus Line 2, multiplied by 48

Line 1		\$ <u>128.35</u>	
Line 2	-	\$ <u>20.78</u>	
		\$ <u>107.57</u>	
	X	<u>48</u>	

\$ 5163.36

4. Base amount (If amount on Line 3 is \$4,000 or more, enter \$4,000. If amount on Line 3 is less than \$4,000, enter amount on Line 3.) \$ 4000.00
5. Minus adjustments (Attach full explanation) - \$ none
6. Amount of rental assistance payment (Line 4 minus Line 5) \$ 4,000.00
7. Annual Payment \$ 1,000.00
(Enter this amount in the space provided in Block 3 on the ~~Guidelines for Determination of Eligibility~~ for page one Replacement Housing Payment for Tenants and Certain Others)

NOTE: If the amount on Line 6 is less than \$500, a lump-sum payment is to be made. If the amount on Line 6 is more than \$500, divide the payment by 4. The resultant amount is the total of each of four annual payments to be made; enter on Line 7.

	NET	NCT NET
15. Water must be heated to not less than 120°F. (8-40ly)	✓	
16. Ceiling height in hotels and apartments must be 8'; in dwelling and service rooms 7½'. (8-503a)	✓	
17. Habitable rooms must have width of 7' in any dimension; water closets 30" in width and at least 2½' in front of the water closet. (8-503c)	✓	
EFFICIENCY UNITS:		
18. Foyer must open from public area. (8-503b.2)		MA
19. There must be 220 sq. ', plus 100 sq. ' for each person in excess of two. (8-503b.5)		
20. A kitchenette must be 3x5 or more with doors and fan or window. (8-503b.4)		
21. A dressing closet must afford privacy with adequate circulation and storage. (8-503b.3)		
22. There must be a separate bathroom accessible from foyer or dressing closet only. (8-503b.5)		
LIVING AREA:		
23. There must be two rooms, one of which must be at least 150 sq. '. (8-503b)*	✓	
24. Rooms for cooking and living, or for living and sleeping, must have at least 150 sq. '. (8-503b)*	✓	
BEDROOMS:		
25. Bedrooms must be at least 90 sq. '. (8-503b)*	✓	
26. There must be 50 sq. ' additional for each occupant in excess of two. (8-503b)* No. brs. _____ Size: #1 _____ #2 _____ #3 _____ #4 _____ #5 _____		MA
KITCHEN:		
27. Plumbing fixtures, including sink, must be of nonabsorbent material with hot and cold running water, properly installed, and in good working condition. (8-505d,c)	✓	
28. A kitchen must have not less than 35 sq. '. (8-503b)	✓	
BATHROOM:		
29. Bathrooms must have at least one electric light fixture. (8-701b)	✓	
30. Bathrooms must not open directly off the kitchen. (8-505f)	✓	
31. Bathrooms and toilet rooms must afford privacy. (8-505g)	✓	

- | | NET | NOT NET |
|--|-----|---------|
| 32. Dwelling unit must contain at least one bathroom with sink, toilet wash basin, tub or shower properly connected to both hot and cold waterlines with air change once every 5 minutes (8-505a) OR | ✓ | |
| 33. In buildings with sleeping rooms there must be toilet facilities, or one toilet, lavatory, tub or shower for every 10 of each sex, accessible from a public hall. | n/a | |
| 34. Plumbing fixtures must be of nonabsorbent material, properly installed, and in good working condition. (8-505d,c) | ✓ | |
| 35. Water closet compartments must be of approved nonabsorbent material. (8-505e) | ✓ | |

BASEMENT:

- | | | |
|--|-----|--|
| 36. Basement areas more than 50% below grade cannot be used for habitation. (8-401,L) & (8-504a) | n/a | |
| 37. Basement areas must be dry and well drained. | n/a | |

SPACE REQUIREMENTS FOR STANDARD HOUSING

- | | | |
|--|-----|--|
| 1. Opposite sex children may not share a bedroom if over six (6) years of age. | n/a | |
| 2. Husband and wife should not share a bedroom with a child over three (3) years of age. | n/a | |
| 3.* Chart of bedrooms needed: | | |

By Bedroom			By Number of Persons		
No. of Bdrms.	No. of Persons:		No. of Persons:	No. of Bdrms:	
	Min.	Max.		Min.	Max.
0	1	2	1	1	
1	1	3	2	1	2
2	2	4	3	1	2
3	4	6	4	2	3
4	6	8	5	3	3
5	8	10	6	3	4
			7	4	4
			8	4	5
			9	5	5
			10	5	6

* Indicates exceptions regarding efficiency units.

COMMENTS:

Unit met City code before HAP could re-rent it. Unit exceeds minimum building codes.

PORTLAND DEVELOPMENT COMMISSION

ONE FIFTH
FLOOR, PORTLAND, OREGON
503.241.2100
PORTLAND, OREGON 97204
FAX 503.241.2100

September 1, 1971

Mrs. Ruth Peoples
252 N. Cook
Portland, Oregon

Dear Mrs. Peoples:

As you may know, you are situated in the National Housing Program which is being carried out with assistance from the U. S. Department of Housing and Urban Development (HUD). The primary source of the money will be acquired some time in the future by the Portland Housing Commission as part of the approved project plan for your area.

If you are in occupancy on the date the National Housing Program acquired the property in which you reside, or are in occupancy at the time of receipt of this letter, you may be eligible for financial assistance. We strongly advise you to contact us before we begin to determine your eligibility for benefits. A copy of the relocation payments for which you may be eligible is enclosed in the attached brochure.

If you are not in occupancy on the date the National Housing Program acquired the property in which you reside, or are in occupancy at the time of receipt of this letter, you may be eligible for financial assistance. We strongly advise you to contact us before we begin to determine your eligibility for benefits. A copy of the relocation payments for which you may be eligible is enclosed in the attached brochure.

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SM:ch
Enclosure

Ifa G. Keller
Chairman

Harold Halvorsen
Secretary

Vincent Raschio
Edward H. Look
John S. Griffith

PORTLAND DEVELOPMENT COMMISSION
1700 S.W. FOURTH AVENUE • PORTLAND, OREGON 97201 • 224-4800

November 12, 1971

John B. Kenward
Executive Director

Mrs. Ruth Peoples
1312 N.E. Prescott Street
Portland, Oregon 97211

Dear Mrs. Peoples:

Under the Uniform Relocation Assistance and Real Properties Acquisition Act of 1970, you are entitled to a "Replacement Housing Payment for Tenants and Certain Others" on the purchase or rental of a replacement dwelling.

If you were previously a homeowner and elect to rent replacement housing, the amount of rental assistance payment may not exceed the amount of Replacement Housing for Homeowners payment to which you would have been entitled.

The amount of rental assistance payment is intended to compensate you for the higher cost of renting a comparable unit. This payment may not exceed \$4,000 over a four-year period. The amount of rental assistance may be computed by any one of the following three methods:

1. Schedule Method. By this method the payment is determined by reference to a schedule of average housing rentals.

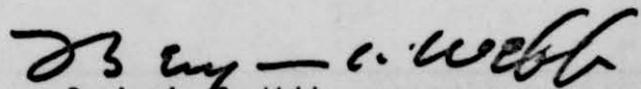
Schedule cost of a <u>2</u> -bedroom rental unit	\$ <u>128.35</u>
Less rental cost of former dwelling, or 25% of adjusted monthly income, whichever is <u>less.</u>	- \$ <u>20.78</u>
	<u>\$107.57</u>
	<u>X 48</u>
Base amount	<u>\$5,163.36</u>
(If above is \$4,000 or more, rental assistance is \$4,000.)	
Rental assistance payment over four-year period	\$ <u>4,000.00</u>

2. Comparative Method. By this method the payment is determined by reference to the reasonable rental cost of a unit comparable to the former residence. An example of when this method is desirable is when the former dwelling is not typical of those in the area on which the schedule is based. If you feel this method is more applicable to your situation, please call your relocation advisor.
3. Alternate Method. If neither the Schedule nor Comparative method is feasible, the case may be submitted to the Department of Housing and Urban Development for a final decision.

A former tenant who elects to purchase is eligible for a replacement housing payment, also. The amount of downpayment assistance for former tenants cannot exceed the amount of downpayment actually necessary, plus certain costs incidental to purchase. The amount of assistance cannot exceed \$4,000.

When you have determined the method by which you will claim a replacement housing payment, please consult with your relocation advisor who will provide you with a claim form. Should you have any questions, please feel free to call our office. You may contact your relocation advisor by calling Mrs. Anne Cathcart, telephone number 224-4800.

Very truly yours,



Benjamin C. Webb
Chief of Relocation and
Property Management

Note:

Enclosed please find a claim form for the maximum rental assistance amount of \$4,000 payable at \$1,000 per year. Please sign page two by the red "X" and return in the self-addressed, stamped envelope provided.

cc: J. Holman Barnes
Attorney, Legal Aid

October 13, 1971

Mr. J. Holman Barnes
Attorney at Law
Legal Aid Service
517 N.E. Killingsworth
Portland, Oregon 97211

Dear Mr. Barnes:

Re: Mrs. Ruth Peoples

I thought you should be brought up to date on Mrs. Ruth Peoples' file. She moved into her one-bedroom Housing Authority of Portland unit at 1312 N.E. Prescott on September 30, 1971.

We issued her a check in the amount of \$380.00 on September 29, 1971, per her claim for a \$200.00 dislocation allowance and \$180.00 fixed payment moving costs. Mrs. Jane Rathbun took her to the MAP office on 1000 N.E. Prescott to sign for her file. She paid a \$20.00 security deposit, \$1.00 for September, \$1.75 rent for October, and a \$1.00 fee deposit. She will be paying her own garbage and electric bills.

On October 12, 1971, Rathbun had delivered a \$20.00 check to Mrs. Peoples' office, per her claim for Mrs. Peoples for storage unit. Mrs. Peoples is the landlord at 1312 N. Killingsworth.

Very truly yours,

Sanjean C. Vail
Chief of Relocation and
Property Management

SCN:Gich

October 12, 1971

On October 12, 1971, a check for \$20 was issued and delivered to Mrs. Lutenie McGee of 3116 N. Williams per claim filed by Mrs. Peoples for the storage of her goods. Under the Uniform Relocation Assistance and Real Properties Act of 1970 there is no provision for reimbursing clients for loss of property. We paid for her storage costs because she was forced to make a temporary move.

I had called Community Care, the Multi-Service Center, the Albina Community Action Center, the Concentrated Employment Program, Salvation Army, and Model Cities in an attempt to find means to help Mrs. Peoples move. No luck at all! Mrs. Peoples informed me on the day she moved that friends would be helping her.

I received a call from Mrs. Peoples on October 6th that she had not received her welfare check and that she had no money! Her caseworker said the postman thought her new unit was vacant and returned the check to welfare. They sent it out again, and Mrs. Peoples received her check on October 9.

AC:ch

10/12/71 : Mrs. Peoples called to say she was locked out. Anne went down to HAP to pick up an extra key for her.

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
PORTLAND, OREGON 97201

N^o 27281 G

DATE October 11, 1971

PAY TO THE
ORDER OF

Mrs. Lutenie McFee

\$20.00

DOLLARS

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

NON-NEGOTIABLE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reimbursement for storage costs per claim filed - Re: Ruthie H. Peoples, 250 N. Cook - Storage costs - remainder of August 1971	\$20.00

Account Distribution

NO.	TITLE	EH	AMOUNT
E1501	Relo Payments (Moving + Ind.)		\$20.00

Lutenie McFee

AC

AD

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
CLAIM FOR RELOCATION PAYMENT
 (Families and Individuals)

HUD-6140.1
(4-66)

NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code)
 Portland Development Commission
 1700 SW Fourth Avenue
 Portland, Oregon 97201

PROJECT NAME (If applicable)
 Emanuel Hospital Project

PROJECT NUMBER
 ORE-R-20

INSTRUCTIONS: If this claim is for a **FIXED PAYMENT**, complete Items 1 through 6 and Item 12. If this claim is for reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property, complete Items 1 through 12. If an item does not apply, write "None" in the space. If a Relocation Adjustment Payment will also be claimed, complete Form HUD-6141.1, Claim for Relocation Adjustment Payment, and attach it to this form.

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 CLAIMANT
 Ruth M. Peoples

2. DATE(S) OF MOVE
 July 1, 1971
 #####

3. ADDRESS FROM WHICH YOU HAVE MOVED

a. Address
 250 N. Cook

b. Apt., Floor, or Room No. _____

c. Was it furnished with your own furniture? Yes No

d. Number of rooms occupied (excluding bathrooms, hallways, and closets): 4

e. Date you moved into this address: 10/1/70

4. ADDRESS TO WHICH YOU HAVE MOVED

a. Address (include ZIP code)
 temporary
 3116 N. Williams Avenue

b. Apt., Floor, or Room No. _____

c. Were household goods moved to or from storage? Yes No
 If "Yes," complete Block B on reverse side of this form.

5. TYPE OF PAYMENT CLAIMED
 Check a or b after consulting local agency:

a. Reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property

b. Fixed Payment (May not be made if storage costs are involved)

Check c if applicable:
 c. Supplementary claim for reimbursement of storage costs

6. TOTAL CLAIM (If claim is for Fixed Payment, consult local agency. If claim is for reimbursement of actual moving expenses, direct loss of property, and/or storage costs, enter sum of Lines 11a, 11b, and 11c below.) \$ _____

DO NOT COMPLETE ITEMS 7 THROUGH 11 IF THIS IS A CLAIM FOR FIXED PAYMENT

7. NAME OF MOVING COMPANY (OR PERSON)
 Lutenie McGee

8. MOVER'S TELEPHONE NO.
 288-4176

9. ADDRESS OF MOVING COMPANY (OR PERSON)
 3116 N. Williams Avenue
 Portland, Oregon 97227

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

a. I have paid the moving charges, as evidenced by the attached itemized receipt or paid bill from the mover, 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, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.

11. AMOUNT OF ACTUAL COSTS AND/OR LOSS

a. MOVING COST (Must be supported by attached receipt(s) or unpaid voucher from mover if local agency is to pay mover directly.)	\$ n/a.
b. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.)	\$ 20.00
c. DIRECT LOSS OF PROPERTY CLAIMED (If any claim is made here, the Statement of Claim on reverse side of this form must be completed.)	\$ n/a.

12. 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.

September 29, 1971
 Date

Ruth M. Peoples
 Signature of claimant

(Over)

A. STATEMENT OF CLAIM FOR ACTUAL DIRECT LOSS OF PROPERTY

List each item of property for which an actual direct loss is claimed, and for which reimbursement or compensation is not otherwise provided, and state the indicated information with respect to each item. Attach any appraisals, estimates, statements of value, or other evidence of estimated value or actual price received for property sold. Attach additional sheets as necessary.

DESCRIPTION OF PROPERTY <i>(List each major item separately)</i>	BASIS FOR AMOUNT CLAIMED <i>(Explain fully, referring to any attached statements)</i>	NAME AND ADDRESS OF PURCHASER	FAIR MARKET VALUE FOR CONTINUED USE AT PRESENT LOCATION	NET PROCEEDS FROM SALE	AMOUNT CLAIMED	FOR LOCAL AGENCY USE
						AMOUNT APPROVED
			\$	\$	\$	\$

B. STATEMENT OF CLAIM FOR STORAGE COSTS

<p>DESCRIPTION OF PROPERTY STORED <i>(List each major item separately. If this is a supplementary claim for storage costs and there has been no change in the number of items stored, reference may be made to description previously submitted. Attach additional sheets as necessary.)</i></p> <p>6 packed boxes. 1 ironing board with cover. 4 suitcases, packed. 1 nightstand 1 stool 1 bed with mattress various clothes in closet Stolen before storage: studio cot, kitchen ware, lines, chairs, table.</p>	<p>NAME AND ADDRESS OF STORAGE COMPANY</p> <p>Mrs. Lutenie McGee 3116 N. Williams Avenue Portland, Oregon 97227</p>	<p>TYPE OF CLAIM</p> <p>1. Check one: <input type="checkbox"/> Initial claim <input checked="" type="checkbox"/> Supplementary claim</p> <p>2. Check if applicable: <input type="checkbox"/> Final claim</p>																		
<p>STORAGE PERIOD</p> <p>1. Total period: <u>1</u> months</p> <p>Check one: <input checked="" type="checkbox"/> Actual <input type="checkbox"/> Estimated</p> <p>2. Date property moved to storage: <u>August 8</u>, 19<u>71</u></p> <p>3. Date property moved from storage: <u>September 29</u>, 19<u>71</u></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">STORAGE COSTS</th> <th style="width: 20%;">AMOUNT</th> <th style="width: 30%;">FOR LOCAL AGENCY USE</th> </tr> <tr> <td></td> <td></td> <td>AMT. APPROVED</td> </tr> </thead> <tbody> <tr> <td>1. Monthly rate</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>2. Total costs actually incurred (cumulative)</td> <td style="text-align: center;">\$ 20.00</td> <td style="text-align: center;">\$ 20.00</td> </tr> <tr> <td>3. Amount previously received as relocation payment</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>4. Amount claimed herewith (Line 2 minus Line 3)</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table>	STORAGE COSTS	AMOUNT	FOR LOCAL AGENCY USE			AMT. APPROVED	1. Monthly rate	\$	\$	2. Total costs actually incurred (cumulative)	\$ 20.00	\$ 20.00	3. Amount previously received as relocation payment	\$	\$	4. Amount claimed herewith (Line 2 minus Line 3)	\$	\$	<p>METHOD OF PAYMENT (Check one)</p> <p><input type="checkbox"/> I have paid the storage charges, as evidenced by the attached itemized receipt or paid bill, and I therefore request reimbursement.</p> <p><input checked="" type="checkbox"/> I have not paid the storage charges, and I therefore request that the attached itemized bill be paid directly to the storage company, in accordance with arrangements made in advance, and with my consent, between the local agency and the storage company.</p>
STORAGE COSTS	AMOUNT	FOR LOCAL AGENCY USE																		
		AMT. APPROVED																		
1. Monthly rate	\$	\$																		
2. Total costs actually incurred (cumulative)	\$ 20.00	\$ 20.00																		
3. Amount previously received as relocation payment	\$	\$																		
4. Amount claimed herewith (Line 2 minus Line 3)	\$	\$																		

FOR LOCAL AGENCY USE ONLY

<p align="center">U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT</p> <p align="center">CLAIM FOR RELOCATION PAYMENT</p> <p align="center">(Certification of Eligibility and Record of Payments -- Families and Individuals)</p>	<p>NAME AND ADDRESS OF CLAIMANT (Include ZIP code)</p> <p>Mrs. Ruth Peoples 3116 N. Williams Portland, Oregon 97227</p> <p>NAME OF LOCAL AGENCY</p> <p align="center">Portland Development Commission</p> <p><small>INSTRUCTIONS: Attach completed Form HUD-6140.2 to completed Form(s) HUD-6140.1 filed by claimant.</small></p>
---	---

A. Does claimant meet all timing requirements for eligibility? YES NO
 If "No," explain:

B. CERTIFICATION

I CERTIFY that I have examined the claim, and the substantiating documentation, 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, the claim is hereby approved and payment is authorized as follows:

ITEM	AMOUNT	AUTHORIZED SIGNATURE	DATE
1. Initial claim, moving expenses and direct loss of property			
a. Reimbursement for moving expenses, including, if applicable, storage and related costs in the amount of \$ _____	\$		
b. Reimbursement for actual direct loss of property	\$	<i>[Signature]</i>	
2. Supplementary claim(s) for storage costs:	\$20.00	<i>[Signature]</i>	10-11-71
3. Final claim, reimbursement for moving expenses covering storage and related costs	\$		

C. RECORD OF PAYMENTS MADE (Total payments may not exceed \$200)

DATE	CHECK NUMBER	AMOUNT	DATE	CHECK NUMBER	AMOUNT
10/11/71	272816	\$ 20.00			\$

D. EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNTS CLAIMED AND AMOUNTS APPROVED

August 14, 1971

To whom it may concern:

I am the owner-occupant of a rooming house at
3116 N. Williams. I have rented storage space to
Mrs. Ruth Peoples, a tenant, for the remainder
of this month (August) at \$20.00. I understand
that Mrs. Peoples will be moving the first part
of September.

Amount due and payable - - - - - \$20.00.

Lutenie McGee
Mrs. Lutenie McGee

September 30, 1971

Mrs. Lutanie McSee,
3116 N. Williams Avenue
Portland, Oregon 97227

Dear Mrs. McSee,

Enclosed please find your billing to Mrs. Ruth Peoples for storage for the month of September. We have provided an envelope for you to return it to us when you have signed it. When we have received the signed copy back in our office, we shall process Mrs. Peoples' claim and send out the check in your name to the address on Williams Avenue.

Should you have any questions, please feel free to call me at 224-4000, extension 31. Thank you.

Sincerely yours,

Director

enc.

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE
 PORTLAND, OREGON 97201

Nº 27049 G

DATE September 29, 19 71

PAY TO THE
 ORDER OF

Ruth N. Peoples

\$ **380.00**

DOLLARS

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

NON-NEGOTIABLE

Portland Development Commission · 224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUNT
		Reimbursement per claim for relocation. Move from 250 N. Cook to 1312 NE Prescott ... Dislocation allowance \$200.00 Fixed payment - own furn. <u>180.00</u>	\$380.00

Account Distribution

NO.	TITLE	EH	AMOUNT
E1501	Relo Payments (Fixed - own furn. - Ind.)	EH	\$380.00

AL

BD

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

NAME AND ADDRESS OF CLAIMANT (Include ZIP code)

Ruth M. Peoples
1312 N.E. Prescott Street
Portland, Oregon 97211

CLAIM FOR RELOCATION PAYMENT

(Certification of Eligibility and Record of Payments -- Families and Individuals)

NAME OF LOCAL AGENCY

Portland Development Commission

INSTRUCTIONS: Attach completed Form HUD-6140.2 to completed Form(s) HUD-6140.1 filed by claimant.

A. Does claimant meet all timing requirements for eligibility? YES NO

If "No," explain:

B. CERTIFICATION

I CERTIFY that I have examined the claim, and the substantiating documentation, 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, the claim is hereby approved and payment is authorized as follows:

ITEM	AMOUNT	AUTHORIZED SIGNATURE	DATE
1. Initial claim, moving expenses and direct loss of property			9-28-71
a. Reimbursement for moving expenses, including, if applicable, storage and related costs in the amount of \$ _____	\$ 380.00		
b. Reimbursement for actual direct loss of property	\$		
2. Supplementary claim(s) for storage costs:			
3. Final claim, reimbursement for moving expenses covering storage and related costs	\$		

C. RECORD OF PAYMENTS MADE (Total payments may not exceed \$200)

DATE	CHECK NUMBER	AMOUNT	DATE	CHECK NUMBER	AMOUNT
9/29/71	270496	\$ 380.00			\$

D. EXPLANATION OF ANY DIFFERENCE BETWEEN AMOUNTS CLAIMED AND AMOUNTS APPROVED

U. S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
CLAIM FOR RELOCATION PAYMENT
 (Families and Individuals)

HUD-6140.1
 (4-66)

NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code)

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

PROJECT NAME (If applicable)

Emanuel Hospital Project

PROJECT NUMBER

ORE. R-20

INSTRUCTIONS: If this claim is for a **FIXED PAYMENT**, complete Items 1 through 6 and Item 12. If this claim is for reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property, complete Items 1 through 12. If an item does not apply, write "None" in the space. If a Relocation Adjustment Payment will also be claimed, complete Form HUD-6141.1, Claim for Relocation Adjustment Payment, and attach it to this form.

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 CLAIMANT

Ruth M. Peoples (F)

2. DATE(S) OF MOVE

September 29, 1971

3. ADDRESS FROM WHICH YOU HAVE MOVED

a. Address

250 N. Cook
 Portland, Oregon

b. Apt., Floor, or Room No. _____

c. Was it furnished with your own furniture? Yes No

d. Number of rooms occupied (excluding
 bathrooms, hallways, and closets): 4

e. Date you moved into this address: Sept. 1970

PARCEL A-3-8

4. ADDRESS TO WHICH YOU HAVE MOVED

a. Address (include ZIP code)

1312 N.E. Prescott Street
 Portland, Oregon 97211

b. Apt., Floor, or Room No. _____

c. Were household goods moved to or from storage?

Yes No

If "Yes," complete Block B on reverse side of this form.

5. TYPE OF PAYMENT CLAIMED

Check a or b after consulting local agency:

a. Reimbursement for actual moving expenses (including storage costs, if applicable) and/or direct loss of property

b. Fixed Payment (May not be made if storage costs are involved)

Check c if applicable:

c. Supplementary claim for reimbursement of storage costs

6. TOTAL CLAIM (If claim is for Fixed Payment, consult local agency. If claim is for reimbursement of actual moving expenses, direct loss of property, and/or storage costs, enter sum of Lines 11a, 11b, and 11c below.)

\$ 380.00

DO NOT COMPLETE ITEMS 7 THROUGH 11 IF THIS IS A CLAIM FOR FIXED PAYMENT

7. NAME OF MOVING COMPANY (OR PERSON)

8. MOVER'S TELEPHONE NO.

9. ADDRESS OF MOVING COMPANY (OR PERSON)

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

a. I have paid the moving charges, as evidenced by the attached itemized receipt or paid bill from the mover, 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, in accordance with arrangements made in advance, and with my consent, between the local agency and the mover.

11. AMOUNT OF ACTUAL COSTS AND/OR LOSS

a. MOVING COST (Must be supported by attached receipt(s) or unpaid voucher from mover if local agency is to pay mover directly.)

\$

b. STORAGE COST (Must be supported by attached receipt(s) or unpaid voucher from storage company if local agency is to pay storage company directly.)

\$

c. DIRECT LOSS OF PROPERTY CLAIMED (If any claim is made here, the Statement of Claim on reverse side of this form must be completed.)

\$

12. 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.

September 27, 1971

Date

Ruth M. Peoples
 Signature of claimant

(Over)

A. STATEMENT OF CLAIM FOR ACTUAL DIRECT LOSS OF PROPERTY

List each item of property for which an actual direct loss is claimed, and for which reimbursement or compensation is not otherwise provided, and state the indicated information with respect to each item. Attach any appraisals, estimates, statements of value, or other evidence of estimated value or actual price received for property sold. Attach additional sheets as necessary.

DESCRIPTION OF PROPERTY <i>(List each major item separately)</i>	BASIS FOR AMOUNT CLAIMED <i>(Explain fully, referring to any attached statements)</i>	NAME AND ADDRESS OF PURCHASER	FAIR MARKET VALUE FOR CONTINUED USE AT PRESENT LOCATION	NET PROCEEDS FROM SALE	AMOUNT CLAIMED	FOR LOCAL AGENCY USE
						AMOUNT APPROVED
COMPUTATION OF PAYMENT:						
Dislocation Allowance	\$200.00		\$	\$	\$	\$
Fixed payment - moving costs	<u>180.00</u>					
Amount due claimant	<u>\$380.00</u>					

B. STATEMENT OF CLAIM FOR STORAGE COSTS

DESCRIPTION OF PROPERTY STORED <i>(List each major item separately. If this is a supplementary claim for storage costs and there has been no change in the number of items stored, reference may be made to description previously submitted. Attach additional sheets as necessary.)</i>	NAME AND ADDRESS OF STORAGE COMPANY	TYPE OF CLAIM			
		1. Check one: <input type="checkbox"/> Initial claim <input type="checkbox"/> Supplementary claim	2. Check if applicable: <input type="checkbox"/> Final claim		
	STORAGE PERIOD		STORAGE COSTS	AMOUNT	FOR LOCAL AGENCY USE
	1. Total period: _____ months				AMT. APPROVED
	Check one: <input type="checkbox"/> Actual <input type="checkbox"/> Estimated		1. Monthly rate	\$	\$
	2. Date property moved to storage: _____, 19____		2. Total costs actually incurred (cumulative)	\$	\$
	3. Date property moved from storage: _____, 19____		3. Amount previously received as relocation payment	\$	\$
		4. Amount claimed herewith <i>(Line 2 minus Line 3)</i>	\$	\$	

METHOD OF PAYMENT (Check one)

I have paid the storage charges, as evidenced by the attached itemized receipt or paid bill, and I therefore request reimbursement.

I have not paid the storage charges, and I therefore request that the attached itemized bill be paid directly to the storage company, in accordance with arrangements made in advance, and with my consent, between the local agency and the storage company.

RECEIVED FROM

(hereinafter called "purchaser")

Dollars (\$)

as earnest money and in part payment for the purchase of the following described real estate situated in the City of Portland, County of Clatsop, State of Oregon

which we have this day sold to said purchaser for the sum of Twenty thousand five hundred Dollars (\$)

on the following terms, to-wit: The sum, hereinabove received for, of Two thousand Dollars (\$)

as additional earnest money, the sum of Two thousand Dollars (\$)

upon completion of title and delivery of deed, the sum of Two thousand Dollars (\$)

Balance of Twenty thousand three hundred Dollars (\$)

payable as follows: at once, at the time of closing

to be paid by check to the order of the seller, and the balance to be paid in cash at the time of closing.

A title insurance policy from a reliable company insuring marketable title in seller is to be furnished purchaser in due course of seller's expense, preliminary to closing. Seller may furnish a title insurance company's title report showing its willingness to issue title insurance, which shall be conclusive evidence as to seller's bona fide ownership of the premises, unless purchaser causes a title report to be prepared by a title insurance company. If it is agreed that if seller does not approve this sale within the period allowed broker below in which to secure seller's acceptance, or if the title to the said premises is not insurable or marketable, or cannot be made so within thirty days after notice containing a written statement of defects is delivered to seller, the said earnest money shall be refunded. But if said sale is approved by seller and title to the said premises is insurable or marketable and purchaser neglects or refuses to comply with any special conditions within ten days after the said evidence of title is furnished and to make payments promptly, as hereinabove set forth, then the earnest money herein received for purchase and additional earnest money shall be forfeited to seller as liquidated damages and this contract thereupon shall be of no further binding effect. The property is to be conveyed by good and sufficient deed free and clear of all liens and encumbrances except zoning ordinances, building and fire regulations, and easements in Federal patents, easements of record and none.

All ranges, plumbing and heating fixtures and equipment (including stoker and oil tanks but excluding fire place fixtures and equipment), water heating, electric lights, fixtures, light bulbs and fluorescent lamps, bathroom fixtures, venetian blinds, drapery and curtain rods, window and door screens, storm doors and windows, window awnings, glassed television antenna, all shrubs and trees and all fixtures except none

are to be left upon the premises as part of the property purchased. The following personal property is also included as a part of the property for sale purchase price:

Seller and purchaser agree to pro rate the taxes which are due and payable for the current tax year. Rents, interest, premiums for existing insurance and other charges shall be paid on a calendar year basis. Adjustments are to be made as of the date of the consummation of said sale or delivery of possession, whichever first occurs. The cost of which shall be borne co-equally between seller and purchaser.

Possession of said premises is to be delivered to purchaser on or before October 1, 1971, or as soon thereafter as existing laws and regulations will permit removal of tenants, if any, time is the essence of this contract. This contract is binding upon the heirs, executors, administrators, successors and assigns of buyer and seller. However, the purchaser's rights herein are not assignable without written consent of seller. In any suit or action brought on this contract, the prevailing party shall be entitled to recover reasonable attorney's fees to be fixed by the court.

Address: 123 N. Miller Ave By: Stanley J. Paul
Phone: 22-5555

AGREEMENT TO PURCHASE

I hereby agree to purchase the property herein described in its present condition and to pay the price of \$ 20,500.00, as set forth above and grant to said agent a period of 30 days hereafter to secure seller's acceptance hereof, during which period my offer shall not be subject to revocation. Said deed or contract to be in name of John W. Hughes, single
Address: 123 N. Cedar Purchaser: John W. Hughes (S E A 1)
Phone: 22-6555

AGREEMENT TO SELL

I hereby approve and accept the sale of above described property and the price and conditions as set forth in above contract, and agree to furnish evidence of title as above provided; also the said deed when stated.
Address: _____ Seller: Stanley J. Paul (S E A 1)
Phone: _____

SELLER PROMPTLY TO PURCHASER, either manually or by registered mail, a copy hereof showing seller's acceptance. Copy hereof showing Seller's signed acceptance sent purchaser by registered mail to purchaser's above address (return receipt requested) on _____
Purchaser acknowledges receipt of the foregoing instrument bearing his signature and that of the seller. Return receipt card received and attached to broker's copy _____

SELLER'S CLOSING INSTRUCTIONS

I agree to pay forthwith to the above named broker a commission amounting to \$ 690.00 for services rendered in the transaction. In the event of a sale, the said commission shall be paid to or retained by the broker to the extent of the agreed upon commission with residue to be paid to the seller and to pay out of the cash proceeds of sale the expense of furnishing evidence of title, of recording fees and revenue stamps, and of any other expenses and premiums payable by me at or before closing. I acknowledge receipt of a copy of this earnest money receipt bearing my signature(s) and that of the purchaser.

NOTE: IF ANY BLANK SPACES ARE INSUFFICIENT, USE S-N No. 810 "READY PAD", TO BE SEPARATELY SIGNED BY BUYER AND SELLER.

Seller: Stanley J. Paul



CREDIT BUREAU REPORTS

a nationwide service



FHA Standard Factual
Data Report No. 891

CORRECT NAME AND ADDRESS

Name... **PERLIN, RUTH NEE**
Street Address... **430 N. COOK**
City and State... **PORTLAND, OREGON**
Zip Code

Case Number.....
Property Address.....
Date on Order Ticket... **7/23/71**
Date Received by Bureau... **7/20/71**
Date Report Mailed... **7/27/71**

SOCIAL SECURITY No. 00-0000
(No reference shall be made in this report to race, creed, color, or national origin)

1-A. Do name and address agree with information shown on request for report? If not, explain below.	1-A. YES	FILE-3/13/67
B. Date of Birth -	B. 52	
2-A. Marital status - number of dependents including self	2-A. DIVORCED.	Dependents: NONE
B. Length of time married -	B.	
C. Did you learn of any separation or divorce?	C. DIVORCED, PER OUR FILE--NO DETAILS.	
3-A. Name of present employer -	3-A. U.S. POST OFFICE, 2 Years (6/29/69)	
B. Position held - length of present connection -	B. CUSTODIAN, 430. NORTH.	
C. Has employment status changed within the past two years?	C.	
4-A. If spouse is presently employed, give name of employer -	4-A.	Years:
B. Position held - length of present connection -	B.	
C. Approximate income -	C. \$	

REMARKS: 1. Amplify his employment history. (This report shall contain information as to the subject's previous employment status, location and salary, if there has been a change in employment status within the past two years.)

2. The reporting bureau certifies that (a) public records have been checked for suits, judgments, foreclosures, garnishments, bankruptcies, and other legal actions involving the subject with the results indicated below: or, (b) equivalent information has been obtained through the use of a qualified public records reporting service with the results indicated below. (Give details). (The records of real estate transfers which do not involve foreclosure may be excluded).

3. The reporting bureau certifies that the subject's credit record in the payment of bills and other obligations has been checked: (a) through the credit accounts extended by a combined minimum of 75% of the larger department stores and larger consumer and unsecured credit granters of the community in which the subject resides, with the results indicated below: or, (b) through accumulated credit records of such credit granters of the community in which the subject resides, with the results indicated below.

Trade Line	How Long Selling	Date of Last Sale	Highest Credit	Amount Owning	Amount Past Due	Terms of Sale and Usual Manner of Payment
CREDIT UNION-REVENUE	4/69	8/70	98.	86.	22.	1-12-6
GENERAL SAVINGS ASSOCIATION						(8/70-100.00)
THE FINANCE COMPANY	12/68		100.	100.		1-12-6 PROFIT AND LOSS
CHAS. BANK	10/68	(REMOVED, 3/13/67)				
DR. GEORGE CHURCH	1/70		415.	34.	180	1-12-6
UTILITY	4/70	6/69				
UTILITY	10/69	5.		PAID 12/70		
UTILITY	2/5/69	6.		7/23/71	BLANCE 49.34, LAST PAYMENT 2/12/71	
LISTED EMPLOYER, SALARY INFORMATION- NO DETAILS.						
POWER OF ATTORNEY: 4/20/66 RE 6, 3/10/68 RE 6, 4/26/68 RE 1478						

Report by **WYNNE, ALMA REALTY (LUCY GIBBETT) 45-70**

Mortgage Stamp Imprint Number (if Applicable)

Prepared by **RETAIL CREDIT, METRO. 454/71**
Name of CBR reporting bureau

City State

The information in this report is provided under contract between the Federal Housing Administration and Credit Bureau Reports, Inc. Information furnished on FHA Standard Factual Data Report No. 891, together with related antecedent reports, is furnished upon the express condition that the FHA Approved Mortgagee and/or its authorized agent or FHA Contract Broker and/or its authorized agent or the V.A. Lender and/or its authorized agent agrees to hold such information in strict confidence for its own exclusive use, never to be communicated except to the FHA, or VA (or bonafide purchasers in the secondary mortgage market), and to save Credit Bureau Reports, Inc., and the reporting credit bureaus, their officers, agents and employees harmless from any and all damages which may arise from the violation of the agreement by such FHA Approved Mortgagee or such FHA Contract Broker, or such VA Lender.

TUMBLE OVER. WRITE FROM TOP DOWN.

(SEE REVERSE SIDE FOR COMMON LANGUAGE FOR CONSUMER CREDIT)

Notice to: Portland Development Commission

I (we) have read your letter describing the relocation benefits that may be available under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, to those displaced on or after January 2, 1971. I (we)

(check one)

- Request that you process my (our) claim for an interim relocation payment. I (we) understand that you will advise me (us) promptly when and if a revised claim may be submitted for adjustments on the basis of the new Act and in accordance with the implementing regulations.
- Will defer filing a claim until you are able to make the full payments authorized by the new Act. I understand that you will advise me (us) promptly when you are authorized to make full payments authorized by such Act.

5/28/71
Date

Ruth M. Joseph
Signature of Claimant
(If more than one claimant, each should sign)

(Keep this copy for your record)

PORTLAND DEVELOPMENT COMMISSION

**SITE OFFICE
EMANUEL HOSPITAL PROJECT
235 N. MONROE ST.
PORTLAND, OREGON 97227
PHONE 288-8169**

May 24, 1971

Housing Authority of Portland
4400 N. E. Broadway
Portland, Oregon 97213

Gentlemen:

This is to inform you that Mrs. Ruth Peoples
of 252 N. Cook, Portland, Oregon 97227,
who wishes to file an application with your office will be displaced
as a result of the acquisition of the property, in which he (or she)
resides, by the Portland Development Commission in the urban renewal
project, ORE R-20.

Thank you for any help that you may render Mrs. Peoples
in his (her) efforts to obtain suitable housing.

Very truly yours,

W. Stanley Jones

WSJ:slc

May 19, 1971
(date)

Gentlemen:

The Portland Development Commission has relocated (is relocating) me from an urban renewal area, and in order to determine my eligibility for further compensation, would like you to give them the amount of my income from my employment.

This will authorize you to give them the information requested below. Please return one copy of the completed form directly to the Portland Development Commission in the envelope provided.

Thank you.

Sincerely,

(name)

(address)

May 19, 1971
(date)

TO: Portland Development Commission

The following information on income from employment is submitted, as requested above:

Employee's name: Mrs. Ruth M. Peoples

Total earnings for 1970: \$ 5152.34

Estimated earnings for current year: \$ 5351.00

U.S. POSTAL SERVICE
PERSONNEL SECTION, RM. 2023
PORTLAND, OREGON 97208

CONFIDENTIAL

Howard F. Wright
(authorized signature)

Chief, Employment & Services

Dwelling Unit Inventory

1 Beds & Springs
 _____ Bedroom Chair
1 Breakfast Table
3 Breakfast Table Chairs
 _____ Bridge Lamp & Shade
 _____ Buffet
1 Chest of Drawers
1 Coffee Table
1 Couch
 _____ Davenport
 _____ Desk
 _____ Dining Table
 _____ Dining Chairs
 _____ Dresser
1 End Table
 _____ Floor Lamp & Shade
 _____ Mirror

_____ Night Stand
 _____ Occasional Chair
 _____ Overstuffed Chair
 _____ Overstuffed Rocker
 _____ Range
 _____ Refrigerator: Brand _____
 _____ Rocker
1 Rug & Pad: Size _____
1 Stool
2 Table Lamp & Shade
 _____ Table, small
 _____ Vanity & Bench
2 Suitcases
1 Trunks
4 Cartons, Boxes, Etc.
✓ Clothes
✓ Bedding & Linens

Miscellaneous (List Items)

Audio Cassette in Bedroom

COMMENTS:

May 11, 1971

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 WSG Date of survey 2/10/71 Tabulator _____ Date tabulated _____
Dwelling Unit No. 2 Structure No. 1 Census Block No. 23 Census Tract No. 22A
Street Address 250 N. Cook Apartment No. _____

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

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

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

	Name	Family relation	Age	Sex	Occupation
1.	<u>Ruth Peoples</u>	<u>Head of household</u>	<u>53</u>	<u>F</u>	<u>Post office</u>
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					

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

Names of jobholders	Names of employers	Street address where jobs are located	Distance to work
<u>Ruth Peoples</u>	<u>U.S. Post Office</u>	<u>Main Post Office</u>	<u>?</u>

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

Names of persons in this household who have income from any source	Amount of income per month	
	In month before this survey	In an average month during 1970
	<u>\$ 156</u>	<u>\$ 156</u>
Total family or household income per month	\$ 156	\$ 156

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

- 1. Location (indicate approximate cross streets) NE Alberta + 14th Aprox.
- 2. Transportation, number of autos owned none, use bus X, walk X
- 3. Will rent house ✓, apartment _____, expect to pay rent, including utilities, at \$^{max} 75 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

Analyst WSJ Date 2/10/71 Surveyed 2/10/71 Tabulator _____ Date _____
 Dwelling Unit No. 2 Structure No. 1 Census Block No. _____ Census Tract No. _____
 Street Address 250 N. Cook Apartment No. _____
 Legal Description _____

NAME OF OCCUPANT: Ruth Peoples NAME & ADDRESS OF OWNER: attorneys Payne, Isaac S. & Martha 3946 N. Barthwick NAME & ADDRESS OF PROP. MGR: _____
 250 N. Cook TELEPHONE: 281-8479 TELEPHONE: _____
 INTERVIEWED? Yes () No INTERVIEWED? () Yes () No INTERVIEWED? () Yes () No

Frank Laugesen 227-3711

I. DESCRIPTION OF STRUCTURE

Kind of dwelling unit	No. of units in bldg.
_____ One-family house	_____
<input checked="" type="checkbox"/> Apt. in a house	_____
_____ Apt. in apt. bldg. or plex	_____
_____ Apt. in comm. bldg.	_____
_____ Mobile home or trailer	_____

This structure has _____ stories (do not count basement)

II. OCCUPANCY STATUS OF DWELLING UNIT

_____ Owner occupied
 Renter occupied
 _____ Vacant

III. SIZE OF DWELLING UNIT

690' Sq. ft. in first floor (county figure)
690' Sq. ft. in dwelling unit (if more than 1 floor)
5 Total no. of rooms (include kitchen, dining, living and bedrooms, exclude bathrooms)
1 No. of bathrooms
2 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
1967 Date of last appraisal
1895 Date structure was originally built

B. Market value data for one-family dwelling

	Market value	Computed value per sq. ft.
Land	\$ _____	\$ _____
Improvements	_____	_____
Total	_____	_____

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	\$ <u>2700</u>	\$ _____
Improvements	<u>2800</u>	_____
Total	<u>5,500</u>	_____

_____ 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	\$ <u>75</u>	\$ <u>85</u>	\$ _____
Electricity			<u>85</u>
Gas			_____
Water			_____
Heat (oil, or other)			_____
Total	\$ <u>75</u>	\$ <u>5</u>	\$ <u>80</u>

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

Assessor's records filed in
Cottrell Hoggan's file

sister: 4706 NE 14th
281-5016

316 N. Williams - 288-4176

RESIDENTIAL RELOCATION RECORD

claim 281-6537
Skidmore Kirby/Booth

RELOCATION WORKER CD + AC PROJECT NO. Ore. R-20 PARCEL A-3-8

NAME PEOPLES, Ruth ADDRESS 252 N. Cook APT NO.

PHONE 288-2208 INITIAL INTERVIEW 5/18/71 SEX F W NW B AGE 53

U.S. CITIZEN ALIEN VETERAN SERVICEMAN DATE ON SITE 8 months

FAMILY COMPOSITION

Name	Relation	Age

Employer: Name U.S. Post Ofc. \$ 412.00 *8/15*
 Address Main ofc. (custodian)
 MCI: Caseworker
 Social Security
 VA. Fed. Mult Co.
 Pension: Name as of 3/15/71 - 87.50
 Other: Name welfare
 TOTAL MONTHLY INCOME

Rent 75.00, Inc. Heat Water Gas Gar Elec Unfurn Furn No. Rms 4

ELIGIBILITY FOR PUBLIC HOUSING: (yes or no)
Over 62 Disabled (Soc. Sec. def.) Income below limits Assets below limits

221 CERTIFICATE OF ELIGIBILITY: Date delivered by

Notify in case of accident:
Name Address Phone

Information Statement given to on by

Notice to move given to on by

Payments: Amount \$ Check No. Date delivered Moved by self (or)
moved by moving company (Phone)

REMOVED FROM CASELOAD: (Date)

Refused assistance

Relocated in:

Low-rent public housing

Other perm. public housing

Standard priv. rent hsg.

Sub-standard priv. rent hsg. with refusal of further aid

Standard sales housing

Sub-standard sales hsg.

Out-of-town

Address unknown, abandoned

Evicted, no further assistance

Other (explain)

REMAINING ON CASELOAD:

Address unknown, tracing

Evicted, further assistance contemplated

Temporarily relocated by LPA within project:

Address

outside project:

Address

FAMILY REFUSED ADDITIONAL ASSISTANCE.
Date Worker

RELOCATION REFERRALS:

Address	Inspection Certified By	Date
<u>HAP</u>	<u> </u>	<u>9/11/71</u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

NEW ADDRESS: 2312 NE Prescott 97211 new
Zip Phone

rent: \$3.75, standard (HAP)

DATE	NOTES	C/W
1/15/71	Flyer delivered. No contact made. Got info from owner.	
1/19/71	Talked to Mrs. Peoples about housing. She felt that she would be interested in buying a house. Made appointment to take her out looking, 5/20/71.	
5/25/71	Went to Mrs. Peoples to Legal Aid. Mrs. Peoples listened to the attorney try to explain what she might get to relocate under the new bill. I told Mrs. Peoples that we are operating under old law until the new law is interpreted. Her ARP payment will not give her enough money to buy a house. She is thinking more about renting.	CD
5/28/71	<p>Mrs. Peoples wants to move. The house she lives in belongs to Mr. Payne who has been in to negotiate his option. Mrs. Peoples is experiencing a hardship because she cannot use her furniture and other goods and assets boarded up in Mr. Paynes house. The apartment caught fire several months ago. Mrs. Peoples at this time is nervous, does not sleep well since she had the fire. She is living with some friends. Called Claire Peoples to get food (288-8321).</p> <p>Talked to Mrs. Peoples supervisor and he felt that she did not want her job. Very bad work record. Mrs. Peoples asked me to call to explain her problem. Introduced Mrs. Peoples to Mrs. Hart, Albina Real Estate, to go look at house. Lived at present address since Sept. 1970. Lived in immediate area 6-7 years. Because of her income we felt that she would not qualify for public housing.</p>	
6/9/71	Mrs. Peoples came in and said she found a place to move and that she put \$55.00 down on the apartment. We did not have a chance to inspect it and see if it was sub-standard or not. She said she would move anyway.	
6/10/71	Had appointment with Mrs. Peoples at 9:00 a.m. and Mr. Stewart was available to help her move, however, Mrs. Peoples did not keep her appt. or call.	CD
6/16/71	<p>Mr. Norland Called from Legal Aid to talk and make demands about Mrs. Peoples. He said that he has affidavits to show that we had not informed Mrs. Peoples about her option under the new law for buying a house. Indicated that we had explained to Mrs. Peoples her options and benefits to which she was entitled according to the new law and the old. After much discussion as to what we could do now under the new law according to Mr. Norland's interpretation and reference to some house committee report, it was agreed that all Mr. Norland wanted us to do at this time was to provide Mrs. Peoples with 2 or 3 referrals of sales housing between the price of \$6,000 to \$10,000. Mr. Norland refused to indicate where Mrs. Peoples is now or how we could contact her, although he maintained he knew where she was, which was not at the apartment, he said, that she supposedly rented. Later discussion with BW indicated that we should be careful about providing too much confidential information about Mrs. Peoples to Mr. Norland when we had no indication from Mrs. Peoples that he was authorized to represent her.</p>	WSJ

DATE

NOTES

C/W

6/22/71

In conversation with Mr. Norland he indicated that he wanted an appointment for Mrs. Peoples to look at 3 or 4 houses that she could buy. I told him I would be glad to, if he would bring Mrs. Peoples or tell us where she could be found. I have gotten no reply. Mr. Norland wanted to know what benefits she would get. I told him I had no authorization to give him that information except in company of Mrs. Peoples or written authorization in our file. I suggested that he write a letter to PDC c/o Relocation Dept., Attn; Ben Webb pinpointing his concern and questions he wanted answered for Mrs. Peoples, if he felt that a meeting would not solve Mrs. Peoples problems.

He mentioned that her employer would take her back if she would get settled - but that she wasn't working at this time. She had gotten some help from Welfare.

Received letter (Xerox copy) stuck in our door, without envelope and signed by Mr. Norland and Doug Green (see attached).

Unless we can establish Mrs. Peoples' whereabouts it is very hard to help her. Mr. Norland has indicated that she moves from one place to another and that he knows her present address. In the interest of helping Mrs. Peoples it seems best that we find out where she moved so that we can inspect to see if the housing is standard or sub-standard. I need to know how much of the furniture was actually moved so that I can process her moving claim for relocation.

Under the old relocation act she would not get any ARP because she has no family. We hope that she would get something more as additional relocation benefit under the new relocation act. She has indicated that she would take a partial payment now and the balance when the new Act was enforced.

CD

~~7/29/71~~
 Mrs. Hart of Albina Real Estate has been working with Mrs. Peoples: First to try and find a rental for her. This started May 29, - Could not find her because she was moving around from place to place — Jim Norland call Mrs. Hart He gave her a number where she could find Mrs. Peoples (around 7/2/71) ~~that~~ She and Mrs Peoples met Mr's Norland + Barnes After meeting legal aid Mrs Hart wrote Earnest Money and took it to Ben Webb After that Mrs Hart brought Earnest Money and Mrs Peoples back to her Office to get credit information, and other Mortgage application then broker sent E.M. for acceptance (has not returned as yet nor has credit report) Mrs Peoples has not come in and paid for credit report. Mrs Hart has paid.

Have Note seen her

7/29/71 Mr. Hartley brought E.M., Credit Report, Appraisal (F.H.A.) For house at 4633 N Kerby for Mrs. Peoples to buy.

INTERVIEW REGISTER

Relocation
Worker

AC

Date
9-8

Mrs. Hart brought Mrs. Peoples into Ben's office today. We concluded after some discussion that since Mrs. P lost her job that she could not qualify for a mortgage loan Mrs. Hart will put the 4655 N. Kirby property back on the market.

Mrs. P had a place in mind on the corner of Kirby and Mason that she wants to check out before she looks at any HAP units.

9-9

Mrs. P. called to say the above apart does not have a stove & ref. and therefore she would not take it. Anne will look at HAP & rent supplement.

Mrs. P. is concerned about her goods stored at 250 N. Cook. A window is broken and she says the rats are eating away at her goods.

9-10

Anne & Mrs. Peoples went to HAP and were told that she does not qualify on the grounds that she was under 62 yrs and not disabled. Mabel Jackson said that ~~the~~ single displaced do not qualify for HAP unless they are handicapped or 100% disabled.

Mrs. Peoples was very upset and started talking under her breath about all the injustices done to people - she kept it up for some time. I told her that I would see if her doctor (Mintz) could qualify her as 100% disabled, though I doubt it. I said I thought we could store her things in a better location than 250 N. Cook.

She gave me some string beans she had picked that day in the field. She is doing quite a little

AC

9/8

25199
Mrs. Peoples paid for an apartment on NE Ivy in July
(\$55 first month's rent) but lost her job and
could not keep it - never moved in. She told
Mrs. Warren of EDDPA about her problem but
neglected to tell Chet Daniels. I assume this
was the big mix-up in losing contact
with Mrs. Peoples.

Mrs. Peoples has applied for social security
or else asked for her social security back
from the Post Office. She says she also will
get retirement pay but this must be only the
amount she paid in for a couple of months.
She is getting welfare now at about \$150
a month. She wants to go back to work as
a hotel maid.

Saly
AK

running now. ~~Ann~~ I said I'd trade and give her some of my jam and apricots.

9/13

Ben said that HAP had agreed to qualify single, (AC) non-elderly, non-disabled displaceds at their most recent Board meeting. He called to confirm w/ Helen Benjamin - which she so confirmed. I will try to get Ruth Drury to okay Ruth Peoples before I do anything else.

Ruth Drury okayed Mrs. P. as a displacee over the phone. Ann will establish file for Mrs. P. at HAP. She prefers to wait for a unit in the NE the ones are available now. 9/14-16 - conferences + ann's sick.

9/17

Took Mrs. P. to HAP. 1-bedroom unit at 13th + Prescott should be ready in 2-3 weeks. Great location for her for under \$20 including utilities.

Mrs. P. is very upset about the house on 250 N. Cook being broken into. PDC does not own it so ERW says we can't board it up. Hesitate to call owner since Mrs. P. has not paid rent there for 2-3 months.

Mrs. P. cried on the way to & from HAP. She had very little sleep the night before because a neighbor called at 4pm to tell her someone had broken into 250 N. Cook. She was unsteady on her feet.

She did understand that a unit would be available in 2-3 weeks. This is fine with her. Jim Barnes agreed that she should not pay to have her goods stored elsewhere but should leave them at Cook and risk a break-in since her dis. all. & first payment can replace most of

INTERVIEW REGISTER

Date

Relocation
Worker

what might get damaged. If worse comes to worse, Anne can probably find a church who would store her things at no cost.

Jim Barnes suggested we call Mr Payne's (owner of 250 N. Cook) attorney, Frank Hagan at 227-3711 and ask him to board up the property. Mr. Payne told Jim he had boarded it up (one 2x4 on the basement door and 3 basement windows boarded up!).

9/20

Note on Anne's desk from Jim Barnes to the effect that Mrs. P. had all her goods stolen last night. Anne will try and find her to determine the extent of the loss. Stan says we have a table chairs now and we'll try to find a bed.

9/21

I took Mrs. Peoples down to welfare to get an emergency grant but the general assistance program has no such coverage. We did get groceries at the Sunshine Division (police 38 NE Russell) which I am hoping will appease her landlady who thinks she should be charging Mrs. P \$50 instead of \$40.

Mrs. Peoples had all of her things on Cook which were not stolen moved into 3116 N. Williams. Two men helped move her and she is concerned that they get paid (paid?). However, Mrs. P. could not give a definite reason for needing money when her service worker contacted her. I feel that as she is not

AE

used to the \$87.85 monthly income that she cannot stretch it far enough, and runs out at the end of the month.

Mrs Peoples was very upset and could not tell me exactly what was stolen or the extent of her loss other than the "clothes off her bed", most of her kitchenware and some of her clothes.

I talked to Jim Barnes who is wondering if she can't get reimbursed for some of her loss.

Ann is checking

10/1/71

Mrs. Peoples moved into her new 1-bedroom HAP apartment at 1312 NE Prescott on September 29, 1971. Glory! She received her \$380 check from us on the same day. On the way down to HAP, she cashed it at 1st National on Broadway and put \$300 into her savings account. She paid \$20 security deposit on her apartment, \$.38 rent for Sept., \$3.75 rent for October, \$2 key deposit. The apartment is very nice, freshly painted, cleaned wood floors, nice kitchen with stove and refrigerator. She will pay her own electric bill (includes electric heat) and garbage service.

AC

Mrs. Peoples arranged for her friends to move her belongings over to the apartment and will pay them something out of the cash she had that day.

Sent out form for storage bill from Mrs. McGee for storing Mrs. Peoples' things at 3116 N. Williams. We will pay Mrs. McGee directly.

This should take care of things. However, there is a remote possibility that she can get a rental assistance payment even though she is in public housing. The regulations seem incomplete on this point. Am waiting for clarification from HUD.

Will send memo to Jim Barnes on what has happened in Mrs. Peoples' case. If he feels she should be compensated for loss of property from her goods at 250 N. Cook, he will have to file claim. We have no such provisions under the new law to pay for loss of property. Memo copy will be in file

10/12 check issued to Mrs. McGee for \$20 for storing Mrs. Peoples goods. Jim McIntosh delivered personally.

11/12 letter of TCO claim sent w/ claim for signature

12/15 another letter of TCO claim w/ sig sent - no response to previous

284-2684

RESIDENTIAL RELOCATION RECORD

Project Name Emanuel ORE R-20 Parcel No. A-3-8 Advisor CAO

Client's Name Peoples, Ruth Phone _____

Address 252 D. Cook Ethn B Age 53

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

Family Composition

Economic Data

Total Number in Family 1

Employer \$

1 wife, husband

Address

Other: Relation Age Relation Age

Relation	Age	Relation	Age

Other Source of Income

MCW \$ 87.50

Total Monthly Income \$ (87.50)

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 1-19-71 Date of info pamphlet delivery 1/19/71

Date Notice to Move given _____ Date Effective _____ Expires _____

CLAIMANT'S INITIAL DATE OF OCCUPANCY

3 YRS

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

Date of initiation of negotiations for purchase of property 5-14-71

Date of Acquisition 12-16-71

Date of letter of Intent 12-30-71

Date of move 9-29-71

DWELLING UNIT FROM WHICH RELOCATED

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

Age of Housing Unit 1895

Size of Habitable Area _____

Furnished with claimant's furniture
 YES NO

Total Number of Rooms 5 Rent Paid \$ _____ Utilities _____

Number of Bedrooms 2 Monthly Housing Payments \$ _____ Taxes _____

Liens \$ _____ (please explain) _____

Acquisition Price \$ _____ Amenities _____

REPLACEMENT DWELLING UNIT

Address 1312 NE Prescott

LPA Referred _____ Self Referred _____

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

Outside city Outside state

Age of Housing Unit HAP

Size of Habitable Area _____

No. of Rooms 3 No. of Bedrooms 1

HAP

For Claimants Who Purchased

Purchase Price of Replacement Dwelling \$ _____

Taxes \$ _____

RHP or TACO (including incidental costs) \$ _____

For Claimants Who Rented

Rent \$ 3.75

Utilities \$ _____

Total Rent Assistance \$ 4000

Amount of Annual Payment \$ 1000

No. of Housing Referrals to:

3 Standard Sales
2 Standard Rent

Agency Referrals:

MCW HAP OTHER (_____)
 Food Stamp Legal Aid Other (_____)

*Community Care
 Multi-Service Center
 }
 OTHER (_____)*

Benefits Received

Date _____ Ck # _____ Type _____ Amount \$ _____
 Date _____ Ck # _____ Type _____ Amount \$ _____
 Date _____ Ck # _____ Type _____ Amount \$ _____

*Albina Comm Action
 Concentrated Employment Center
 Salvation Army - Model Cities*