	DESCRIPTION .		ROLL NO	ODOMETER
	EMANUEL BUSINESS CONCERNS			
	AND NON-PROFIT ORGANIZATIONS			
PARCEL NO.	LEHL, HENRY	C.R. ROBBINS INN	•	
R-15-3	3000 N. COMMERCIAL			1
PARCEL NO.	ALBINA PIPE BENDING CO. INC.			
RS-5-4	225 N. RUSSELL			1
N3-3-4	OWNER: JOHN F. SMITH			
PARCEL NO.	BRINK RENTAL			
R-10-9	535 N. MONROE			
R-10-4	3127 N. COMMERCIAL			
PARCEL NO.	CRINER APARTMENTS			1
R-14-3	554-544 N. MONROE			
14)	OWNER: LLOYD CRINER			
PARCEL NO.	CARLOS BODY & FENDER SHOP			
RS-5-6	2609 N. VANCOUVER			
N3-3-0	OWNER: CHARLES MONTOYA			
PARCEL NO.	CATHAY FOOD MARKET			
RS-4-9 -	2619 N. WILLIAMS			
13-4-3	OWNER: RICHARD LOW			
DARGEL HO			·	
PARCEL NO.	DEMME BROTHERS, INC.	•		
RS-4-6	35 N. RUSSELL			
DARCEL NO	OWNER: JOHN & ALICE BOLZELL			
PARCEL NO.	DENSON ROOMING HOUSE			
A-4-7	3316 N. GANTENBEIN			
DARCEL NO	OWNER: JEWEL BENSON			
PARCEL NO.	FIELD-SENSI THREADER MACHINE			
R-9-7	OWNER: HERBERT FIELD			
PARCEL NO.	GETHSEMANE CHURCH OF GOD IN	CHRIST		
RS-5-5	237 N. RUSSELL	CHRIST		
N3-3-3	23/ N. ROSSELL			
PARCEL NO.	GOOD SAMARITAN CHURCH OF GO			
R-8-7	3204 N. COMMERCIAL			Total of the second
K-0-/	3204 N. COMMERCIAL			
PARCEL NO.	GRESS APARTMENTS			
RS-4-7	109 N. RUSSELL			
,	105 111 11000222			
PARCEL NO.	INGLE SERVICE STATION	C.R. MANNING BROS		
RS-2-1	2847 N. WILLIAMS	GARAGE '		
	OWNER: RONALD INGLE			
PARCEL NO.	JEWELL ALL STAR DAIRY			
RS-4-2	20 N. KNOTT			
	OWNER: IRVING ERICKSON			
PARCEL NO.	JEWELL GLASS COMPANY			
RS-5-6	2607 N. VANCOUVER			
	OWNER: SEYMOUR R. DANISH			
PARCEL NO.	JOHNSON (JULIA MAE) APARIME	115		
E-4-8	2640 N. KERBY			
PARCEL NO.	JOHNSON (LUCILLE) APARTMENT			
E-4-8	321 N. RUSSELL			

		ate
Name	Jewell All Star Dairy Operation Ice Cream Mann	facture 1 233-490
Address	Opr/Mgr Irving Ericleson	R/Tel 636 - 7966
0wner	Address	Tel
Attorney	y Address	Tel
0ther_		Tel
Moved in	nto projectMoved to above addre	ss 1947.
Lease	Sub-lease Owns Equip. Rental	Exp
Gas by_	Elec by Garba	ge by
Water	Heat by	
No. Dwl	g. Units Aver. Ten R	ent Range
Future F	Plans	
Space Re	equirements	Zone
Date	Notes	by
135/11	Exicleson. Company moved that offices from site 4 yrs ago of but left, 3 items of equipment they want to have moved to the location. Items are 2 Blower Business is eligible for moving exercise though machine at location project. Moved 7-13.71.	coil Units,



URBAN REDEVELOPMENT FUND-PROJECT EXPENDITURES-EMANUEL HOSPITAL, ORE. R-20

Warrant Number

PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201

Nº

16 EH

DATE August 24

, 19_71

PAY TO Jewell All Star Bairy

\$ 490.10

DOLLARS

TO THE TREASURER OF THE CITY OF PORTLAND, OREGON

NON-NEGOTIABLE

AUTHORIZED SIGNATURE

Portland Development Commission .

224-4800

DETACH BEFORE DEPOSITING CHECK

DATE	INVOICE OR CONTRACT NOS.	DESCRIPTION	AMOUN
		Reimbursement for moving expenses per Claim for Relocation Payment filed. Move from 20 N. Knott Street to 927 S.E. Harlon Street. $(RS-4-2)$	\$490.10

Account Distribution

NO.

TITLE

AMOUNT

E1501

Relocation Payments - B (Moving)

\$490.10

BO

DROW.

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

CLAIM FOR RELOCATION PAYMENT

(Certification of Eligibility and Record of Payments - Business Concerns and NAME OF CONCERN

RS 4-2

Jewell All Star Dairy

NAME OF LOCAL AGENCY

Portland Development Commission

INSTRUCTIONS: Attach completed Form HUD-6146.5 to claim form(s)

Nonprofit Organizations)			claimed and amounts approved.				
A. MOVING EXPENSES	S AND DIRECT LOSS OF PROP	ERTY	B. SMALL	BUSINESS DISPLACE	MENT PAYMENT		
1. Does concern meet d	Il timing requirements for eligibi	ility?	1		AS REPORTED BY CLAIMANT	AS VERIFIED BY LOCAL AGENCY*	
If "No," explain:				annual gross s or sales	s	s	
2. Complete if claim co	2. Complete if claim covers storage costs:			annual net income	\$	5	
Did concern, upon displacement, reestablish operations at a new location? Yes No			* Verification	* Verification based on:			
3. Complete if payment of \$25,000:	will be made for moving expense	es in excess					
a. Total amount of m	noving expenses	s	3. Is concern part of an enterprise having two or more establishments outside project area? Yes No				
b. Minus \$25,000		- 25,000.0		ncern meet all timing	requirements for eligi	bility?	
	red by HUD and local agency ine b; also, Line d plus Line e)		If "No,"	s No			
d. Amount reimb grant funds	ursable from Federal relocation						
e. Amount paid	out of local funds						
provisions of Feder	ave examined the claim, and the rel law and the Regulations issu approved and payment is authori	ed by the Departs					
CHARLES AND	ITEM	AFRICATION OF	AMOUNT	AUTHORIZE	D SIGNATURE	DATE	
property a. Reimbursement fo	g expenses and direct loss of or actual moving expenses im covers storage and related co	s: \$	490.10	k1/			
				Bank		8-17-11	
b. Reimbursement fo	or actual direct loss of property	3				A STATE OF THE STA	
2. Supplementary claim	n(s) for storage costs:						
	rsement for actual moving expens	THE RESERVE OF THE PARTY OF THE					
4. Small Business Dis	placement Payment	5					
	MENTS MADERRANT					MARKET BELLEVILLE	
DATE	CHECK NUMBER	AMOUNT	DA	TE CH	ECK NUMBER	AMOUNT	
8/24/11	16 EH \$	490,1	2 50	\$			
the second of th	THE REPORT OF THE PARTY OF THE		To be the second				

(4-66)CLAIM FOR RELOCATION PAYMENT (Business Concerns and Nonprofit Organizations) NAME AND ADDRESS OF LOCAL AGENCY (Include ZIP code) PROJECT NAME (If applicable) Portland Development Commission Emanuel Project 1700 S.W. Fourth Avenue Portland, Oregon 97201 PROJECT NUMBER Ore. R-20 INSTRUCTIONS: Complete all applicable items on this page and, as appropriate, Schedules A, B, and C. If this claim covers only moving expenses of outdoor advertising display, amit Items 2, 4, 5, 7, 8, and 9. As used on this form, the term "concern" includes business concerns and nonprofit organizations. 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. Name of concern 3. Name and address of person filing this claim on behalf of concern (Include ZIP code) Jewell All Star Dairy Irving Erickson 927 N. E. Marion Street Portland, Oregon 2. Date established in project area 1947 4. Form of ownership (Check one) 5. Type of business (Check one) Personal Nonprofit organization Sole proprietorship Manufacturing Corporation X Retail trade (Specify type) Nonprofit N Partnership Business service Wholesale trade Farming organization 7. a. Address presently occupied by concern: 6. Address(es) in project area occupied by concern, prior to submission of this claim 927 K. E. Marion Street DATES OCCUPIED ADDRESS FROM b. Date move to this July 7, 1971 address started: Last address: c. Date move to this July 13, 1971 1947 7/71 20 N. Knott Street address completed: -8. Did concern discontinue business? YES X NO Previous address(es) (If applicable) If "Yes," complete the following: Reason for discontinuing business: Does concern plan to reestablish? YES NO 9. (Check if applicable) 11. Amount of claim Claim covers move to a. Reimbursement for actual moving expenses (Must be accompanied or from storage by completed Schedule A) 490 10 (Claim must be supported by b. Reimbursement for actual direct loss of property (Must be completed Schedule A) accompanied by completed Schedule B) 10. (Check if applicable) c. Small Business Displacement Payment (Must be accompanied by completed Claim covers only moving Schedule C) (Payment not available to nonprofit organization) expenses of outdoor advertising display TOTAL 490 110 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 (and, to the best of my knowledge, the concern indicated in Block 1) have not submitted any other claim

for, or received, reimbursement or compensation for any item of loss or expense in this claim, that I (and, to the best of my knowledge, the concern indicated in Block 1) will not accept 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

Date Signature of owner, partner, or officer Vice President

Title (if appropriate)

25134 Corrected Invoice

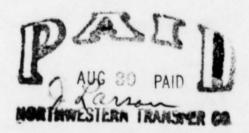
PORTLAND DEVELOPMENT COMMISSION 235 N. Monroe Street Portland, Oregon

7/13/71

RE: JEWEL ALL STAR DAIRY

To move from Jewel Ice Cream building at 20 N. Knott Street to new location at 927 **S**. E. Marion Street; opening building twice and closing same in order to move two (2) air conditioning tanks from elevated positions in burned building:

7/7	Truck & driver 6 hrs @ \$13.80 per hr I Helper 6 hrs @ \$8.55 per hr	\$	82.80 51.30
7/13	Crane & Operator 7 hrs @ 13.50 per hr Truck & driver 7 hrs @ \$13.80 per hr I Helper 7 hrs @ \$8.55 per hr Foreman on Job - II hrs @ \$9.55 per hr		94.50 96.60 59.85 105.05
	TOTA	\L: \$	490.10 L



Rec'd 9-71

PORTLAND DEVELOPMENT COMMISSION

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

June 30, 1971 (date)

Northwest Transfer Co. 215 S. E. Morrison Street Portland, Oregon 97214

Gentlemen:

RE: Relocation Move

The following relocation move is subject to reimbursement under the Urban Renewal Act. On satisfactory completion of the job, carrier may submit claimant's statement to this office for payment by the Commission. Maximum \$200x00x \$500.00.

GENERAL PROVISIONS:

Overtime must be authorized in writing.

Pickup and delivery--above locations only.

All billings must be in claimant's name.

Submit this letter or copy with statement.

Other commitments strictly between carrier and claimant.

Very tray yours,

W. Stanley Jones

WSJ:slc enc.

NAME OF CONCERN

RS 4-2

CLAIM FOR RELOCATION PAYMENT

(Business Concerns and Nonprofit Organizations)

SCHEDULE A. STATEMENT OF CLAIM FOR ACTUAL MOVING EXPENSES

Jewell All Star Dairy

1. This	Schedule A covers: (Check a d	r b)	
X a.	. Claim for moving expenses, i	ncluding no storage costs	
	(Complete Block A-1 on reve	rse side)	
Пь	Claim for moving expenses of	onsisting of storage and related costs	
	(Complete Blocks A-1 and A-		
	Check appropriate box(es):		
	Initial claim	Supplementary claim	Final claim
2. Metho	d of payment, moving costs (C	neck one)	
_ a			eipt(s) or paid bill(s) from the mover and/or other
	contractors, and I therefore r	equest reimbursement.	
ГХІЬ	. I have not paid the moving c	harges, and I therefore request that the attach	ed itemized bill(s) be paid directly to the mover
-			e, and with my consent, between the local agency
	and the mover and/or other c		
3. If app	olicable, method of payment, st	orage costs (Check one)	
			asiat as asid bill, and I therefore comment enimbureament
l la	. I have paid the storage char	jes, as evidenced by the attached itemized rec	ceipt or paid bill, and I therefore request reimbursement.
Пь	. I have not paid the charges,	and I therefore request that the attached item	ized bill be paid directly to the storage company, in
	accordance with arrangement	s made in advance, and with my consent, bety	ween the local agency and the storage company.

A-1. SUPPORTING DATA - MOVING EXPENSES

INSTRUCTIONS: Complete this Block if reimbursement is claimed for actual moving expenses for which reimbursement or compensation is not otherwise provided. Indicate costs of work performed by mover and/or other contractors. If storage costs are included, complete Block A-2. Attach receipt(s) or unpaid voucher(s) and/or other supporting documentation. Attach additional sheets as necessary.

WORK AND/OR	IDENTIFICATION OF MOVER,		FOR LOCAL AGENCY USE		
SERVICE PERFORMED	NAME	ADDRESS	TELEPHONE NO.	AMOUNT CLAIMED	AMOUNT APPROVED
Moving	Northwest Transfer Co.	215 S.E. Morrison Portland, Oregon 97214	232-2121	\$ 490.10	s 490.10
Electrical					
Plumbing					
Other (List)					
Storage 1					
			TOTAL	s 490.10 ⁽²⁾	s 490.10 ⁽³⁾

STORAGE PERIOD

Include after storage costs have been incurred (see Block A-2)

²Enter this amount on first page of claim form, Line 11a.

³Enter this amount on Form HUD-6146.5.

3. Date property moved to storage:

A-2. SUPPORTING DATA - STORAGE COSTS

DESCRIPTION OF PROPERTY STORED

(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.)

1. Total period (If this is not the final claim, enter estimate)	, 19		
	4. Date property mo	oved from storage:	
2. Period covered by this claim	, 19		
		For Local Agency Use	
STORAGE COSTS	AMOUNT	AMOUNT APPROVED	
1. Monthly rate	s	s	
Total costs actually incurred (cumulative)	\$	s	
Amount previously received as relocation payment	\$	s	
4. Amount claimed herewith (Line 2 minus Line 3) ENTER THIS AMOUNT IN BLOCK A-1 ON LINE MARKED "STORAGE."	\$	s	

MONTHS

August 6, 1971 Mr. Irving Erickson 927 S. E. Harion Street Portland, Oregon Re: Jewell All Star Dairy Dear Mr. Erickson: We have attached a copy of the "Claim for Relocation Payment" in the amount of \$490.10. Please sign where indicated and return in the self addressed envelope provided. If you have any questions do not hesitate to give me a call. Very truly yours, W. Stanley Jones WSJ: 16 Enclosures Squeed 8.10.11



NORTHWESTERN TRANSFER CO.

215 S. E. MORRISON

PORTLAND, OREGON 97214

SINCE 1882

TELEPHONE (503) 232-2121

TELETYPE (503) 224-4833

WAREHOUSING

NDED MMON SUSEHOLD GOODS STORAGE YARD STORAGE OFFICES & DISPLAY SPACE

TRUCKING

OREGON - ANYWHERE FOR HIRE CARTAGE - PORTLAND METROPOLITAN AREA VANCOUVER-PORTLAND

DISTRIBUTION

POOL SHIPMENTS VIA WATER, RAIL, TRUCK OR AIR

JUL 3 1 1971

 Portland Development Commission 235 N. Monroe, Portland, Oregon 97201

GENERAL

THEATRICAL AIR FREIGHT RAIL FORWARDER CONVENTIONS & EXHIBITS

PLEASE DETACH AND RETURN THIS PORTION WITH YOUR REMITTANCE

DATE	REFERENCE	CHARGES	CREDITS	BALANCE
				93.80
BALANCE FOR			93.80 -	.00•
FEB 18*71	34	490.10+		490.10 •
JUL 13'71	25,134	490.101		
		TON CATE	EXT. NO. 22	
	FOR FURTHER I	NFORMATION CALL	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				REG 5. 11
				8
				•

Burroughs Form 98-1004

REFERENCE SYMBOLS

WR - WAREHOUSE RECEIPT FB - FREIGHT BILL DO - DELIVERY ORDER

JE - JOURNAL ENTRY CM - CREDIT MEMO

NORTHWESTERN TRANSFER CO

PLEASE PAY LAST AMOUNT



NORTHWESTERN TRANSFER CO.

215 S. E. Morrison Street . Portland, Oregon 97214

TELEPHONE 503 232-2121 TELETYPE 503 - 224 - 4833

. PORTLAND DEVELOPMENT COMMISSION 235 N. Monroe Street Portland, Oregon

Date 7/13/71

SINCE 1882

MOVING

STORAGE

DISTRIBUTION

TRUCKING

WAREHOUSING

RE: JEWEL ALL STAR DAIRY

To move from Jewel Ice Cream building at 20 N. Knott Street to new location at 927 N. E. Marion Street; opening building twice and closing same in order to move two (2) air conditioning tanks from elevated positions in burned building:

7/7	Truck & driver 6 hrs @ \$13.80 per hr 1 Helper 6 hrs @ \$8.55 per hr	\$ 82.80 51.30
7/13	Crane & Operator 7 hrs @ 16.05 per hr Truck & driver 7 hrs @ \$13.80 per hr 1 Helper 7 hrs @ \$8.55 per hr Foreman on Job - 11 hrs @ \$9.55 per hr	11.2.35 96.60 59.85 105.05

TOTAL:

\$ 490.10



25134 Corrected Invoice

PORTLAND DEVELOPMENT COMMISSION 235 N. Monroe Street Portland, Oregon 7/13/71

RE: JEWEL ALL STAR DAIRY

To move from Jawei ice Cream building at 20 N. Knett Street to new location at 927 N. E. Marion Street; opening building twice and closing same in order to move two (2) air conditioning tanks from elevated positions in burned building:

7/7	Truck & driver 6 1 Helper 6 hrs &	Nrs 6 213.80 per nr	51.30
7/13	Truck & driver 7	hrs @ \$13.80 per hr	94.50 96.60 59.85 05.05
	Porents on 100 -	위하면 있는데 전 보다 있는데 함께 하는데 있는데 한 경험에 있는데 보고 있는데 보고 있다. 이 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은	90.10

PORTLAND DEVELOPMENT COMMISSION SITE OFFICE EMANUEL HOSPITAL PROJECT 235 N. MONROE ST. PORTLAND, OREGON 97227 June 30, 1971 PHONE 288-8169 (date) Northwest Transfer Co. 215 \$. E. Morrison Street Portland, Oregon 97214 Gentlemen: RE: Relocation Move The following relocation move is subject to reimbursement under the Urban Renewal Act. On satisfactory completion of the job, carrier may submit claimant's statement to this office for payment by the Commission. Maximum \$200x00x \$500.00. Claimant: Jewell All Star Dairy Pickup Address: 20 N. Knott Street Delivery Address: 927 N. E. Marion Street Time and Date: When convenient - but must be completed by 7/28/71 Rate: PUC published rates Description: Move two coil units from building and deliver. To include disconnection of plumbing and securing building when finished to prevent entrance. GENERAL PROVISIONS: Overtime must be authorized in writing. Pickup and delivery -- above locations only. All billings must be in claimant's name. Submit this letter or copy with statement. Other commitments strictly between carrier and claimant. Very truly yours, W. Stanley Jones WSJ:slc enc.

June 28, 1971 Mr. Irwin Erickson Jewell All Stor Dalry 927 S. E. Marion Portland, Oregon 57202 Dear Mr. Erickson: Enclosed is a copy of our informational Statement for business firms which includes supplemental self-move instructions. Payroll record forms are also included for your use if you decide to conduct a selfmove. Please sign the attached receipt form and return in the enclosed envelope. Please contact me if you have any questions. Very truly yours, W. Stanley Jones WSJ: 15

RECEIPT

I hereby acknowledge receipt of a copy of the Portland Development

Commission's INFORMATIONAL STATEMENT FOR PERSONS AND FIRMS DOING

BUSINESS WITHIN PROJECT BOUNDS and SUPPLEMENTAL SELF-MOVE INSTRUCTIONS.

Firm
Firm
Firm
Joy
by
Title

(- 29-71

REC'd 11