

	DESCRIPTION	ROLL NO	ODOMETER
PARCEL NO. RS-3-4	MARSHALL, LAVERNE 2740 N. VANCOUVER		
PARCEL NO. A-3-13	MARSHALL, LOUIS 247 N. FARGO		
PARCEL NO. R-14-8	MERCER, EMLIE 511 N. MORRIS		
PARCEL NO. R-10-15	MINNEWEATHER, STEWART 3117 N. COMMERCIAL		
PARCEL NO. A-3-17	MITCHELL, JAMES HENRY 217 N. FARGO		
PARCEL NO. A-8-10	MONTAGUE, CHARLES 319 N. FARGO		
PARCEL NO. A-3-19	MORGAN, EUGENE 3213 N. VANCOUVER		
PARCEL NO. A-3-19	MORGAN, RONNIE 3213 N. VANCOUVER		
PARCEL NO. A-2-4	NAILEN, ERMA ELAINE 3100 N. GANTENBEIN		
PARCEL NO. R-14-7	NICHOLS, RENA ELISESE 527 N. MORRIS		
PARCEL NO. A-4-10	NOLAND, FRANK & ETHEL 241 N. COOK		
PARCEL NO. A-2-11	OVERHOLTS, ANNA 3129 N. VANCOUVER		
PARCEL NO. A-3-20	PACE, THEODORE P. 3217 N. VANCOUVER		
PARCEL NO. R-4-7	PARASHOS, GEORGE 423 N. RUSSELL #4		
PARCEL NO. R-14-7	PARKS, DORINA 527 N. MORRIS		
PARCEL NO. E-3-6	PARRISH, BEVERLY 2653 N. COMMERCIAL		
PARCEL NO. A-2-5	PATTERSON, BILLY 227 N. MONROE		
PARCEL NO. E-3-12	LEWIS, MATTIE (PATTERSON) 531 N. RUSSELL		

R E S U M E

DATE \_\_\_\_\_

NAME Billy Patterson

---

---

Billy Patterson moved into 227 N. Monroe shortly after Portland Development Commission moved Chester Edwards out. This particular house was going through condemnation and took a long time to get possession of the property. Mr. Patterson was very agreeable about moving. He lived there with his mother and uncle.

(signed)

*Chambers*  
worker

RESIDENTIAL RELOCATION RECORD

Project Name \_\_\_\_\_ Parcel No. A-2-5 Advisor CD

Client's Name Patterson, Billy Phone 282-0608

Address 222 N. Monroe Ethn Black Age 33

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

Family Composition

Total Number in Family 6

2 wife, husband

Other: Relation Age Relation Age

Relation	Age	Relation	Age
Mother	47		
Mother	44		
Wife	28		
Son	17		
Son	6		

Economic Data

Employer Part. garbage \$ 700<sup>00</sup>

Address \_\_\_\_\_

Other Source of Income \_\_\_\_\_

\_\_\_\_\_ \$

\_\_\_\_\_ \$

Total Monthly Income \$ (700<sup>00</sup>)

- Eligible for Public Housing     YES     NO  
 Eligible for Welfare             YES     NO  
 Eligible for (Other)             YES     NO

- Presently Receiving Welfare     YES     NO  
 Other Assistance \_\_\_\_\_  
 \_\_\_\_\_

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 6-7-72 Date of Info pamphlet delivery \_\_\_\_\_

Date Notice to Move given \_\_\_\_\_ Date Effective \_\_\_\_\_ Expires \_\_\_\_\_

CLAIMANT'S INITIAL DATE OF OCCUPANCY

5-5-72

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

Date of initiation of negotiations for purchase of property \_\_\_\_\_

Date of Acquisition \_\_\_\_\_

Date of letter of Intent \_\_\_\_\_

Date of move 7-7-72 12-29-72

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 \_\_\_\_\_

Size of Habitable Area \_\_\_\_\_

Furnished with claimant's furniture  
 YES     NO

Total Number of Rooms 4    Rent Paid \$ 8000    Utilities \_\_\_\_\_

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

Liens \$ \_\_\_\_\_ (please explain) \_\_\_\_\_

Acquisition Price \$ \_\_\_\_\_    Amenities \_\_\_\_\_

REPLACEMENT DWELLING UNIT

Address 3041 NE 25<sup>th</sup>    LPA Referred     Self Referred \_\_\_\_\_

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

Outside city     Outside state

Age of Housing Unit over 60

Size of Habitable Area 800-900

No. of Rooms 4    No. of Bedrooms 2

For Claimants Who Purchased

Purchase Price of Replacement Dwelling \$ \_\_\_\_\_

Taxes \$ \_\_\_\_\_

RHP or TACO (including incidental costs) \$ \_\_\_\_\_

For Claimants Who Rented

Rent \$ 8000

Utilities \$ 1800

Total Rent Assistance \$ \_\_\_\_\_

Amount of Annual Payment \$ \_\_\_\_\_

No. of Housing Referrals to:

\_\_\_\_\_ Standard Sales

\_\_\_\_\_ Standard Rent

Agency Referrals:

\_\_\_\_\_ MCW    \_\_\_\_\_ HAP    \_\_\_\_\_ OTHER ( \_\_\_\_\_ )

\_\_\_\_\_ Food Stamp    \_\_\_\_\_ Legal Aid    \_\_\_\_\_ Other ( \_\_\_\_\_ )

Benefits Received

Date \_\_\_\_\_ Ck # \_\_\_\_\_ Type \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date \_\_\_\_\_ Ck # \_\_\_\_\_ Type \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date \_\_\_\_\_ Ck # \_\_\_\_\_ Type \_\_\_\_\_ Amount \$ \_\_\_\_\_

**RESIDENTIAL RELOCATION RECORD**

CLIENT'S NAME Patterson, Billy RELOCATION ADVISOR CD  
 ADDRESS 227 N. Monroe PHONE 282-0608 PROJECT NAME Emanuel R-20  
 SEX M ETHN B VETERAN \_\_\_\_\_ AGE 33 PARCEL NO. A-2-5  
 MARITAL STATUS M TENURE t/o  
 DISABILITY \_\_\_\_\_ INDIV \_\_\_\_\_ FAMILY x  
 ELIGIBLE FOR: PUBLIC HOUSING \_\_\_\_\_ FHA 235 \_\_\_\_\_  
 RENT SUPPLEMENT \_\_\_\_\_ OTHER x  
 INITIAL INTERVIEW 6-27-72 DATE INFO PAMPHLET DELIVERED \_\_\_\_\_  
 NOTICE TO MOVE \_\_\_\_\_ DATES EFFECTIVE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
 NOTIFY IN CASE OF EMERGENCY \_\_\_\_\_

DATE ON SITE: <u>4-5-72</u>
INITIATION OF NEGOTIATIONS: _____
DATE OF ACQUISITION: _____

ECONOMIC DATA

Employer Portland Garbage Co. \$ 700.00  
 Address 2828 S. W. Water  
 MCW \_\_\_\_\_  
 Social Security \_\_\_\_\_  
 Pension \_\_\_\_\_  
 Other \_\_\_\_\_  
 TOTAL MONTHLY INCOME \$ 700.00

FAMILY COMPOSITION

Name	Relation	Age
Verla Thompson	Mother	47
Otis Johnson	Uncle	44
Wanda Patterson	Wife	29
Billy Jr. "	Son	11
Steve "	Son	6

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		
Private Sales			

Age of Structure \_\_\_\_\_ No. Rooms 4  
 No. Bedrooms 2 Furn. \_\_\_\_\_ Unfurn x  
 Utilities \$ \_\_\_\_\_  
 Monthly Payments (Rent) \$ 80.00  
 Acquisition Price \$ \_\_\_\_\_  
 Taxes \$ \_\_\_\_\_ Equity \$ \_\_\_\_\_  
 Liens \$ \_\_\_\_\_

Size of Habitable Area \_\_\_\_\_

HOUSING REFERRALS

Address	Bedrooms
<u>3041 N. E. 25th</u>	<u>4</u>
_____	_____
_____	_____
_____	_____
_____	_____

AGENCY REFERRALS

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

AGENCY ACTION:

REASONS:

Appeals		
Evicted		
Refused Assistance		
Address Unknown (tracing)		
Other (death, etc.)		

TEMPORARY RELOCATION

Within Project	
Outside Project	

Date Moved In \_\_\_\_\_  
 Address \_\_\_\_\_  
 Reason \_\_\_\_\_

REPLACEMENT DWELLING UNIT

Client Referred \_\_\_\_\_ LPA Referred \_\_\_\_\_ x

Address 3041 N. E. 25th Phone \_\_\_\_\_ Date of Move 12-29-72

WHERE RELOCATED:				S	SS
Same City	x	Subsidized Sales	Single Family		
Outside City		Subsidized Rental	Multiple Family		
Out of State		Public Housing	Duplex		
		Private Rental	Mobile Home		
		Private Sales			

Furnished \_\_\_\_\_ Unfurnished \_\_\_\_\_ Number of Rooms 4 Number of Bedrooms 2 Habitable Area \_\_\_\_\_

Utilities \$ \_\_\_\_\_ Monthly Payments (Rent) \$ \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_

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

Name of Moving Company \_\_\_\_\_ Name of Realtor \_\_\_\_\_

BENEFITS RECEIVED

Type	Ck #	Date	Amount
RHP			\$
TACO (Rental)			\$
TACO (Sales)			\$
Fixed MovingDA	647EH	1-3-73	\$ 420.00
Actual Move			\$
Storage			\$
Incidental			\$
Interest			\$

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

TOTAL BENEFITS RECEIVED \$ 420.00

REALTOR: \_\_\_\_\_ ESCROW CO. \_\_\_\_\_ OFFICER \_\_\_\_\_

**PORTLAND DEVELOPMENT COMMISSION**

1700 S.W. FOURTH AVENUE  
 PORTLAND, OREGON 97201

N<sup>o</sup> 647 EH

DATE January 3, 19 73

PAY TO **Billy Patterson**

\$ **420.00**

**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 NOB.	DESCRIPTION	AMOUNT
		Reimbursement per Claim for Relocation Payments filed. Move from 227 N. Monroe (Parcel A-2-5).  Fixed moving payment <span style="float: right;">\$220.00</span> Dislocation allowance <span style="float: right;"><u>200.00</u></span>	<u>\$420.00</u>
Received 1-81-73 Billy Patterson			

**Account Distribution**

NO. TITLE AMOUNT

0600 E60 901

RELOCATION PAYMENT

Project: Emmanuel ORE R-20 Parcel: A-2-5

Payable to: Billy Patterson Amount

For: <input type="checkbox"/>	RHP for Homeowners . . . . .	\$	_____
<input type="checkbox"/>	Incidental Expenses for Homeowners (if separate claim) . . . .	\$	_____
<input type="checkbox"/>	RHP for Tenants & Certain Others:		
	Rental: Total approved \$ _____; Annual amount. . . . .	\$	_____
	or Purchase: . . . . .	\$	_____
<input checked="" type="checkbox"/>	Fixed Moving Payment . . . . .	\$	<u>220</u>
<input checked="" type="checkbox"/>	Dislocation Allowance. . . . .	\$	<u>200</u>
<input type="checkbox"/>	Actual Moving Costs. . . . .	\$	_____
<input type="checkbox"/>	Storage Costs (if separate claim). . . . .	\$	_____
<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 Billy Patterson Less - \$ \_\_\_\_\_\*

Move from 227 N. Monroe Total \$ 420

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



(For Local Agency Use Only)

DETERMINATION OF ELIGIBILITY FOR RELOCATION PAYMENT  
FOR MOVING EXPENSES (FAMILIES AND INDIVIDUALS)

NAME AND ADDRESS OF CLAIMANT:

Billy Patterson  
227 N. Monroe  
Portland, Oregon

NAME OF LOCAL AGENCY:

Portland Development Commission

INSTRUCTIONS: Attach this form to the pertinent claim form filed by claimant. Attach an explanation of any difference between amounts claimed and amounts approved.

1. Does claimant meet basic eligibility requirements?  Yes  No

If "No," explain:

2. Complete if claim is for a fixed payment including an amount for moving articles located in household storage space:

Date items inspected: \_\_\_\_\_  
Month-Day-Year

3. If claim is for a self-move, does approved amount exceed estimated cost of accomplishing the move through services of a commercial mover or contractor?

Yes  No

If "Yes," explain basis for approved amount:

4. 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:

(For Local Agency Use Only)

(Complete either A or B:)

Item	Amount <sup>1/</sup>	Authorized Signature	Date
A. Fixed Payment and Dislocation Allowance	\$		
1. Fixed payment \$ <u>220.00</u>			
2. Dislocation allowance \$ <u>200.00</u>			
<i>WSD</i> 3. Total \$ <u>420.00</u>	<u>420.00</u>	<i>BCC</i> <i>2360</i>	<u>12-28-72</u>
B. Actual Moving and Related Expenses	\$		
1. Initial payment including, if applicable, storage and related costs in the amount of \$ _____			
2. Supplementary payment (s) for storage costs:			
3. Final payment for moving expenses covering storage and related costs			

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

5. RECORD OF PAYMENTS MADE

Date	Check Number	Amount	Date	Check Number	Amount
<u>1/3/73</u>	<u>647EH</u>	<u>\$ 420.00</u>			<u>\$</u>

Dwelling Unit Inventory

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

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

Miscellaneous (List Items)

Ottoman  
Work benches 2  
Lot of Misc articles  
in Basement.  
T.V. 3 - Stand  
Stereo 1

Small Ref. in Basement  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

COMMENTS:

**WORKSHEET FOR ALL MOVING CLAIMS**

1. Name Billy Patterson Project Emanuel  
 2. Date(s) of move ? Parcel No. R-20  
 3. Dwelling unit from which you moved:  
 Address 227 N. Monroe No. of rooms 5 *4 Room + Basement*  
 \_\_\_ Furnished  Unfurnished Date you moved into this unit 7/5/72

4. Dwelling unit to which you moved:  
 Address 3041 NE 25th  
 Were goods moved to or from storage? \_\_\_ Yes  No

5. Total claim \$ 420

-----  
 FIXED PAYMENT: \$200 + \$220 = \$420  
 -----

**ACTUAL MOVING COSTS**

6. Name of moving company (or person) \_\_\_\_\_  
 7. Mover's telephone \_\_\_\_\_ 8. Mover's address \_\_\_\_\_  
 9. Method of payment  
 \_\_\_ a. reimburse client (show paid bill)  
 \_\_\_ b. pay mover directly (show bill)  
 \_\_\_ c. let local agency contract with mover  
 10. Amount actual costs  
 a. Moving costs (attach receipt or voucher) \$ \_\_\_\_\_  
 b. Cost of insurance (attach invoice) \$ \_\_\_\_\_  
 c. Storage cost (attach receipt or voucher) \$ \_\_\_\_\_

-----  
**STORAGE COSTS**

Name, address and ZIP code of storage company \_\_\_\_\_

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

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

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

WILLIAMS, MONTAGUE, STARK, HIEFIELD & NORVILLE, P. C.

ATTORNEYS AND COUNSELORS AT LAW

BOISE CASCADE BUILDING

PORTLAND, OREGON 97201

TELEPHONE 222-9966

DAVID R. WILLIAMS  
MALCOLM J. MONTAGUE  
DONALD R. STARK  
PRESTON C. HIEFIELD, JR.  
OLIVER I. NORVILLE  
JAMES E. GRIFFIN  
LARRY C. HAMMACK  
RICHARD E. ALEXANDER

July 17, 1972

Mr. Richard L. Amato  
Attorney at Law  
Hawthorne Professional Center, Suite 7  
4511 S. E. Hawthorne Boulevard  
Portland, Oregon 97215

Re: Portland Development Commission  
v.  
Eugene C. Bonner, et ux.  
A - 2 - 5

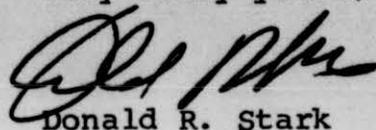
Dear Mr. Amato:

Thank you for your letter of July 12, 1972. I will be happy to pursue the possibilities outlined in your letter for placing the Bonners into their own home on a new lot. This has never been done in the past, but if that is what the Bonners desire I feel that we should pursue the matter.

With this in mind I am going to have Stan Jones, of our Emanuel site office, contact the Bonners to show them available lots and see if the locations are acceptable to them.

There may be other complications of which I am not presently aware, but I will certainly attempt to see that your clients' desires are satisfied with regard to their home.

Very truly yours,

  
Donald R. Stark

DRS:avh

Answered by (DRS) 7/19/72 - Bonners  
not owner-occupants. Dan Stark said no  
deal then & to disregard above letter

June 28, 1972

Don Stark

Chat Daniels

Parcel A-2-5, Commonly known as: 227 N. Monroe

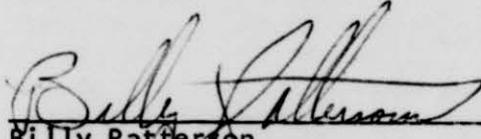
At present Mr. Billy Patterson is the tenant and occupies the house along with his mother Mrs. Velia Thompson and uncle, Mr. Otis Johnson. They are paying \$80.00 per month as rent and have a month to month tenancy. Mr. Patterson took possession May 5, 1972 and has lived there approximately three months. Mr. Eugene Bonner, owner of the above property, is Mr. Billy Patterson's uncle.

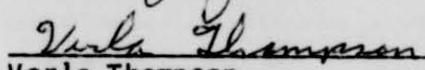
Chat Daniels

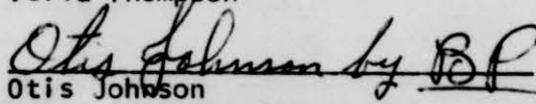
December 22, 1972

Gentlemen:

Please make the moving expense and moving allowance due to those people living in the Emanuel Project Area at 227 N. Monroe, payable to Mr. Billy Patterson.

  
\_\_\_\_\_  
Billy Patterson

  
\_\_\_\_\_  
Verla Thompson

  
\_\_\_\_\_  
Otis Johnson

WILLIAMS, MONTAGUE, STARK, HIEFIELD & NORVILLE, P. C.

ATTORNEYS AND COUNSELORS AT LAW  
BOISE CASCADE BUILDING  
PORTLAND, OREGON 97201

TELEPHONE 222-9966

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OLIVER I. NORVILLE  
JAMES E. GRIFFIN  
LARRY C. HAMMACK  
RICHARD E. ALEXANDER

June 21, 1972

Mr. Stan Jones  
Emanuel Project Office  
Portland Development Commission  
235 North Monroe Street  
Portland, Oregon 97227

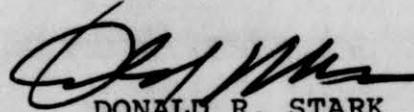
Re: Parcel A-2-5

Dear Stan:

The above file is now set for condemnation. An appraisal made in 1970 indicates that a Chester Edwards was the tenant, paying a rental of \$62 a month. Would you please give me the name of the present tenant and the rental which he is paying. Also, how long has he been in possession, and does he have more than a month-to-month tenancy?

Very truly yours,

*Month to Month*



DONALD R. STARK  
Legal Counsel  
Portland Development Commission

DRS:an

R E C E I P T

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

*Billy J. Anderson*

6-27-72  
date

DATED this 3 day of Jan. 1973.

The undersigned does hereby consent and agree that all personal property left by me in the premises at 227 N. Monroe, Portland, Oregon may be considered and treated by the PORTLAND DEVELOPMENT COMMISSION as abandoned property and disposed of without incurring any obligation or liability to account to me therefore.

Billy Patterson  
(firm name)

by: \_\_\_\_\_