-	DESCRIPTION		ROLL NO	ODOMETER
PARCEL NO.	WESTERN FOOD EQUIPMENT CO. 3321 N. VANCOUVER OWNER: ROBERT LAUGHLIN		NOLL NO	OUTMETER .
PARCEL NO. E-3-1	WYSINGER RENTAL 500 N. KNOTT OWNER: CECIL BROWN	-		
	•			
				!
	•			

Date	2	-1	6-7	73

WSJ

Name_Wy	singer Rental Operation Tel	
Address	500 N. Knott Opr/Mgr_Harry Wysinger R/Tel_2	284-6125
Owner B	rown, Cecil & Betty Sue et.a Address 1002 N. Parkside Tel	
Attorne	Address Tel	
Other	Tel	
Gas by	Sub-lease Owns Equip Rental Garbage by Heat by	
No. Dwl	Heat by	
	Plans	
	equirements Zone	
		by
Date	equirementsZone	1
Date	Notes  Received letter from Harry Wysinger	by

Received Warrant and mailed same to Mr. Wysinger (see file).

3-14-73

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



**Warrant Number** 

### PORTLAND DEVELOPMENT COMMISSION

1700 S.W. FOURTH AVENUE PORTLAND, OREGON 97201

Nº

718

EH

March 14 DATE

19 73

PAY TO Harry Wysinger \$16.41

**DOLLARS** 

TO THE TREASURER OF THE CITY OF PORTLAND, OREGON cale 28

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 Business Moving Expenses filed. Move from 500 N. Knott (Parcel E-3-1).	\$16.41

**Account Distribution** 

TITLE

AMOUNT

Merch 14, 1973

Mr. Harry Wysinger 124 N. E. Tillamook Portland, Oregon 97212

Dear Mr. Wysinger:

Enclosed is our Warrent No. 718 EN In the amount of \$16.51 representing reimbursement per claim for Business Moving Expenses in your move from 500 N. Knott.

Very truly yours,

W.Staniey Jones Relocation Supervisor

WSJ: k Encl

### RELOCATION PAYMENT

Project: Emanuel ORE R-20 Parcel: E3-1	
Payable to: Harry Wysinger Amount	
For:RHP for Homeowners	
Rental: Total approved \$ ; Annual amount \$	
or Purchase:	
Fixed Moving Payment	
Actual Moving Costs	
Storage Costs (if separate claim)	_
Business: In Lieu Payment	
Business: Storage Costs	
Business: Loss of Property	
Name of Client Wysinger Rental Less - \$	
Move from 500 N. Kenott Total \$ 16.	41
Accounting: Indicate symbol & Acct. No.  0 900	
F GO 70/NE TOCAL TOTT F AYMETT, 10-11	

# DETERMINATION ELIGIBILITY FOR RELOCATION PAYONT - BUSINESS (this page for Local Agency use only)

			Commission
NAME OF CONCERN: Wysinger Ren	ital	NAME	OF LOCAL AGENCY: Portland Development/
PROJECT OR PROGRAM IDENTIFICA	TION: Emanu	uel ORE R-20	PARCEL NO. E3-1
for a payment in lieu of actual modern is for a payment for actual modern (s) filed by the cl	ual moving armoving and relational and relationships and relationships are also because the second and the second are also because the second	nd related e elated expen tach an expl No claim fo	expenses. Complete Block B if claim is expenses. Complete Block C if claim is esses. Attach the completed form to the anation of any difference in the amount or a relocation payment in excess of of HUD.
4. Date move started Fe	ne): Concerr of project of lacement: eb. 16, 1973	Notice of i Acquisition Other, expl	ntent to acquire (date) of Real Property (date) Jan 18, 1973 ain Date property vacated Date storage authorized
1. Is the business part same or similar business. 2. Can the business be a State basis for Agence. 3. Average annual net in As reported by claims.	of a commerce the services which is relocated with the services of the service	cial enterpress not being thout substation:	rise having another establishment in the acquired: Yes No notice No notice No
AMOUNT OF IN LIEU PAY	MENT. ¢		APPROVED: \$
C. PAYMENT FOR ACTUAL MOVING		EXPENSES	D. CERTIFICATION
Item	Amount Claimed	Amount Approved	I certify that I have examined this claim and have found it to be in
<ol> <li>Moving expenses, including \$ covering storage.</li> </ol>	\$ 16.41	\$ 16.41	accord with all applicable provisions of Federal Law and the Regulations issued by the Department of Housing and Urban Development pursuant thereto.
2. Direct loss of property	\$	\$	Therefore, this claim is approved and payment is authorized in the amount of \$ 16.41
3. Searching expenses	\$	\$	DATE 3-14-73
4. Total (sum of lines 1, 2, and 3)	\$ 16.41	\$ 16.41	Bellythorized Signature
E. RECORD OF PAYMENTS MADE:			
DATE CHECK NO.	A	MOUNT	
	\$		
	\$		
	Ś		

INSTRUCTIONS: Complete all items on this page except: If claim is for moving and related expenses as documented on Schedules A, B, and/or C, omit Block 9; if claim is for a payment in lieu of moving and related expenses as documented on Schedule D, omit Block 8. As used on this form the term "concern" includes business concerns, nonprofit organizations, and farm operations. NOTE: If claim exceeds \$10,000, the Local Agency must obtain HUD concurrence prior to making payment. NAME OF CONCERN: Wysinger Rental 1. DATES OCCUPIED ADDRESS (ES) ADDRESSES IN PROJECT OR PROGRAM FROM T0 AREA OCCUPIED BY CONCERN PRIOR 500 N. Knott TO SUBMISSION OF THIS CLAIM 2-16-73 ADDRESS PRESENTLY OCCUPIED BY CONCERN STATE TYPE OF BUSINESS OR PRINCIPAL BUSINESS ACTIVITY Apartment Rental 124 N.E. Tillamook Date move to this address started 2-16-73 DID CONCERN DISCONTINUE BUSINESS? Yes\_ FORM OF OPERATION (check one) x Sole Proprietorship IF YES, STATE REASON FOR DISCONTINUING BUSINESS not feasible to move Partnership Corporation Nonprofit Organization DOES CONCERN PLAN TO REESTABLISH? Yes No x Other (identify) FINAL TYPE OF CLAIM: THIS CLAIM FOR REIMBURSEMENT IS: INITIAL\_ SUPPLEMENTARY AMOUNT AMOUNT OF BUSINESS RELOCATION CLAIM FOR MOVING AND RELATED EXPENSES: Reimbursement for actual reasonable moving expenses \$16.41 (Attach completed Schedule A). Includes storage costs. Reimbursement for actual direct loss of tangible personal property (Attach completed Schedule B) Reimbursement for actual reasonable searching expenses (Attach completed Schedule C) \$16.41 TOTAL TOTAL AMOUNT CLAIMED PAYMENT IN LIEU OF MOVING AND RELATED EXPENSES. I certify that this business is not part of a commercial enterprise having another establishment not being acquired which is engaged in the same or similar business, that displacement will cause a substantial loss of existing patronage, and claim payment in the amount of \$\_\_\_\_ Signature of Agent or Owner 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 willingly falsifies...or makes any false, fictitious or fraudulent statement or entry shall be fined \$10,000 or imprisoned not more than five years, or both." I certify under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and any other applicable law, that this claim and the Schedules and information submitted herewith and made a part hereof have been examined and approved 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 incurred. Signature of Owner or Authorized Agent Title

DATE

### A-1 SUPPORTING DATA - MOVING EXPENSES

WORK AND/OR SERVICE PERFORMED	IDENTIFICATION OF MOVER, ST	AMOUNT	FOR LOCAL AGENCY USE		
- TENIONIED	NAME ADDRESS		TELEPHONE	CLAIMED	AMOUNT APPROVED
MOVING	Self Move			\$16.41	\$16.41
ELECTRICAL					7.0.11
MECHANI CAL					
PREPARATION OF BIDS/ESTIMATES					
SUBSTITUTE EQUIPMENT*					
OTHER (List)					
STORAGE					
			TOTAL	\$ 16.41	\$ 16.41

a.	Actual cost of substitute equipment installed	
	Less proceeds from sale, trade-in, or market value	\$
· .	Unrecovered cost (a. minus h)	\$
d.	Estimated cost to move old equipment	\$
	AMOUNT CLAIMED (lesser of c. or d.)	è

## SCHEDULE A-2 SUPPORTING DATA - STORAGE COSTS

STORAGE PERIOD

1.	Total period (if this is not the final		MONTUS
	claim, enter estimate)		MONTHS MONTHS
2.	Period covered by this claim		MUNINS
3.	Date property moved to storage		
4.		AMOUNT	AMOUNT APPROVED
	STORAGE COSTS	AMOUNT S	AMOUNT ATTROVED
1.	Monthly rate Total costs actually incurred	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
2.	(cumulative)	s	
3.	Amount previously received as	Ť i	
٥.	relocation payment	\$ \$	
4.	Amount claimed herewith (line 2 minus		
	line 3) enter this amount in Block A-1		
	on line marked "storage".	\$ \$	
	DESCRIPTION	ON OF PROPERTY STORED	
	List each major item separately. Attac	ch additional sheets as necessary	to provide
	a complete listing, if a detailed stora	age manifest or warehouse receipt	cannot be
	provided. (Storage costs compensable a	as moving expense, must be reduce	d accordingly
	when items are removed from storage):		
		SCHEDULE A-3	
		HOD OF PAYMENT	
	I HAVE NOT paid the costs of the follow		
	T INTE NO.		
	Cartage Mechanical	Bids/Estimates	
	Storage Electrical	0ther	
	The unpaid itemized invoices or bills a made (check one): ( ) in advance, ( the Local Agency and the mover and/or amounts due be paid directly to the appropriate the second seco	) at this time, and with my con other contractors, I hereby requ	nsent, between
	amounts due be paid directly to the ap	propriate contractor (3).	Initials
	I HAVE PAID the costs of the following	services:	
	CartageMechanical_	Bids/Estimates	
	StorageElectrical_	Other	
			hawah
	Itemized receipts or paid bills in the	proper amounts are attached. I	петеру
	request reimbursement.		Initials
			Timerans
	This concern has conducted a SELF-MOVE	and has incurred costs as evide	nced by
	the attached itemized invoices, payrol	I sheets and other documentation	•
	hereby request reimbursement.		Initials
			IIIICIAIS
	Olturn cotitutes cotification of	this Schedule and its attachmen	ts in accordance
	Signature constitutes certification of with and subject to the provisions of	Item 10 on the "Claim for Reloca	tion Payment -
	Business' to which this Schedule is an	attachment	c.o.i. raymone
		actacimont.	
	X Harry suffriger		
	Signature of Owner or Authorized Ag	ent	Date

Mar. 7, 1973 (date)

Portland Development Commission 235 N. Monroe Portland, Oregon 97227

Gentlemen:

500 N	following payro undersigned clai L. Knott L.E. Tillamook	oll record is formant's invento	or labor actually ry from	performed in th	ne moving
NAME_Ha	rry Wysinger 124 N.E. Tilla	nook	SOCIAL SEC	CURITY NO	
DATE	HOURS WORKED	HOURLY RATE	GROSS EARNINGS	AMOUNT PAID	
2/16	3	\$5.47	\$16.41	\$16.41	CONTRIBUTIO

I, Harry Wysinger , do hereby certify that I worked the number of hours and was paid as shown above, on the relocation of Wysinger Rental .

X Havy suffreger Signature of Employee

I CERTIFY under the penalties and provisions of U.S.C. Title 18, Sec. 1001, and 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 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, services actually performed and/or storage costs actually incurred.

Signature of Claimant

MEMORANDUM

Date March 7, 1973

TO:

File

FROM:

WSJ

SUBJECT:

Self-Move Harry Wysinger

The amount claimed of \$16.41 does not exceed the estimated cost of accomplishing this move by a commercial mover. The Commercial moving rate is \$26.56 per hour and at even the minimum possible time of 1 hour a commercial move would have been more expensive.

Portland, Oregon February 16, 1973 Taken from house at 500 north Knott by Harry Wysinger. Refrigerater Bed and mattress 2 chairs (living room) 50 gals oil Large clothes closet wood heater and pipe Time 3 hours. Harry Wysinger 124 N. E. Tillamook 284-6125