

Mark Gordon Governor

State of Wyoming Department of Workforce Services

THE DIVISION OF WORKERS' COMPENSATION
5221 Yellowstone Road
Cheyenne, WY 82002
https://dws.wyo.gov



Elizabeth Gagen, J.D.
Director
Jason Wolfe
Deputy Director

Certificate of Lien

STATE OF WYOMING SHERIDAN COUNTY KNOW ALL MEN BY THESE PRESENTS: WC# 800159975 Oct 9, 2024

Tracking # 30123507

That the State of Wyoming, Department of Workforce Services, Division of Workers' Compensation, herein called the Division, hereby claims a lien on all real and personal property owned by: TONGUE RIVER STONE INC, hereby called the Debtor.

That there is due the Division from the Debtor under the Workers' Compensation Act of 1991, Wyoming Statute 27-14-203(c), as amended, tax/premium, interest and penalties and/or Wyoming Statute 27-14-203(a), as amended, liabilities as follows:

| Invoice Type | Period | Tax/Premium | Interest/Penalties | Total |
|--------------|--------|-------------|--------------------|----------|
| Premium | Q01 1 | \$0.00 | \$6.27 | \$6.27 |
| Premium | Q02 2 | \$413.74 | \$8.41 | \$422.15 |

This lien is for premium, interest and penalties and /or liabilities noted above, through Oct 9, 2024, plus accruing interest of 1% per month [WY statute 27-14-203(c)] on the unpaid premium until the premium is paid in full.

That the Division has compiled with the Workers' Compensation Act in the assessment of said premium, interest, and/or liabilities and that the last known address of said Debtor was,

TONGUE RIVER STONE INC 120 KLEENBURNROAD SHERIDAN, WY 82801

That there is presently due an owing the sum of \$428.42 and the Division hereby asserts a statutory lien on all real and personal property owned by the debtor, as provided for in the Workers' Compensation Act of 1991, Wyoming Statute 27-14-203(e) as amended.

Division of Workers' Compensation, 5221 Yellowstone Road, Cheyenne, WY 82002

STATE OF WYOMING LARAMIE COUNTY

2024-795244 10/24/2024 10:46 AM PAGE: 1 OF 1 BOOK: PAGE: FEES: \$20.00 IH CERTIFICATE OF LIEN EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK

I, Shannel Welsch, am an authorized representative of the State of Wyoming, Division of Workers' Compensation, and I have read this Certificate of Lien and I know its contents are true.

By Shannel Webch

The foregoing was acknowledged before me by Shannel Welsch, State of Wyoming, Division of Workers' Compensation

Lien Specialist, this 15 day of October 2024

· An

NOTARY PUBLIC

Angelina Llamas

Motary Public - State of Wyoming

Commission ID- 155660

Commission expires on 03/31/2028

My Commission Expires

3/31/28

NO. 2024-795244 CERTIFICATE OF LIEN

EDA SCHUNK THOMPSON, SHERIDAN COUNTY CLERK WYO WORKER SAFETY & COMPENSATION 1510 E PERSHING BLV CHEYENNE WY 82002 Collaborating to support a thriving workforce and economy.

EMPLOYER SERVICES PHONE: 307-777-6763

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