

Return Address: Cypress Construction

24941 Elk Dr.

Mt. Vernon WA

98273

KATHY HILL  
SKAGIT COUNTY AUDITOR

99 MAY 17 AM 57

RECORDED \_\_\_\_\_ FILED \_\_\_\_\_  
REQUEST OF \_\_\_\_\_

9905170161

## CLAIM OF LIEN

Indexing information required by the Washington State Auditor's/Recorder's Office, (RCW 36.18 and RCW 65.04) 1/87:		(please print last name first)
Reference # (If applicable): _____		
Grantor(s) (Owner): (1) <u>John Lund</u>	(2) _____	Add'l. on pg _____
Grantee(s) (Claimants): (1) <u>Cypress Construction</u>	(2) _____	Add'l. on pg _____
Legal Description (abbreviated): <u>Lot D of Mt Vernon Short Plat 1-97</u>		Add'l. legal is on pg _____
Assessor's Property Tax Parcel / Account # <u>P111654</u>		

Cypress Construction  
Claimant  
VS.  
JOHN LUND  
Name of person indebted to Claimant:

Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

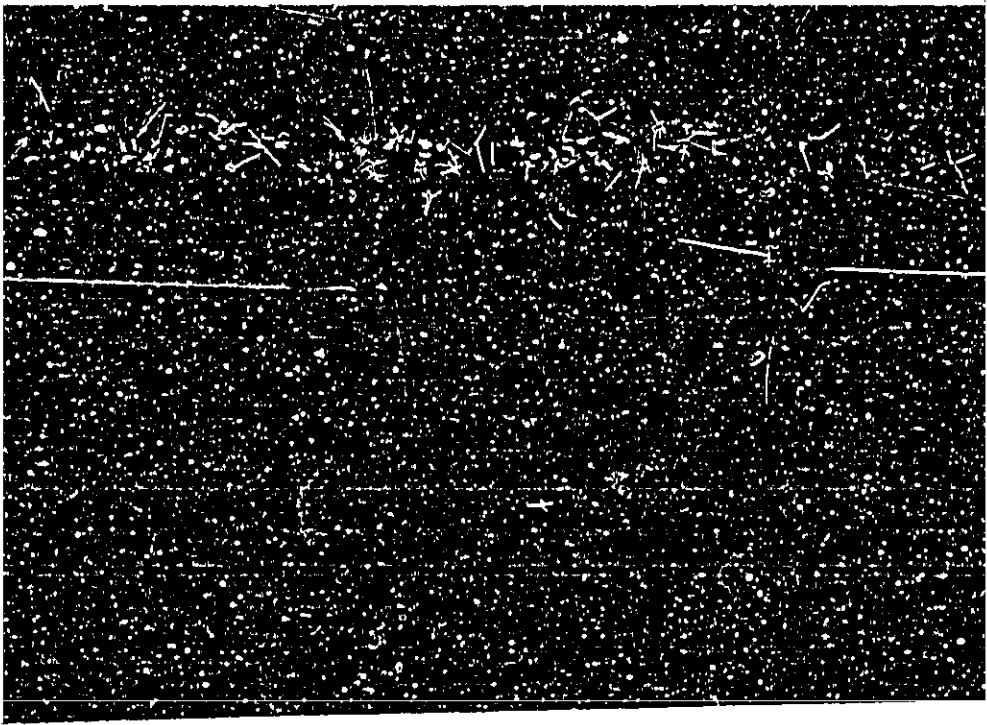
- NAME OF LIEN CLAIMANT: Cypress Construction  
TELEPHONE NUMBER: 856-4906 ADDRESS: 24941 Elk Dr  
Mt Vernon WA 98273
- DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: Jan 5 1999
- NAME OF PERSON INDEBTED TO THE CLAIMANT: John Lund
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): P111654 1001 Hoag Rd
- NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): John Lund  
TELEPHONE NUMBER: 757-3916 work  
ADDRESS: 1001 Hoag Rd Mt Vernon 98273
- THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL, OR EQUIPMENT WAS FURNISHED: April 15 1999



Claim of Lien  
©Washington Legal Blank, Inc., Issaquah, WA Form No. 90 10/96  
MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.

9905170161

BK1990PG0651



7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$ 372284
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: NO

Cypress Construction Christine Critchley  
Claimant  
Christine Critchley owner  
Print or Type Name

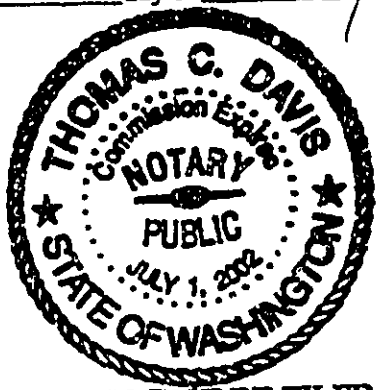
Address 24941 Elk Dr Mt Vernon 9823  
856-6406 / 202-0233  
Telephone Number

STATE OF WASHINGTON

County of SKAGIT } SS.

Christine Critchley, being sworn, says: I am the claimant (or attorney of the claimant, or administrator, representative, or agent of the trustees of an employee benefit plan) above named; I have read or heard the foregoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause and is not clearly excessive under penalty of perjury.

Date this 17<sup>th</sup> day of May, 1999.



Print Name THOMAS C. DAVIS  
Notary Public in and for the State of Washington  
My appointment expires: 7-1-2002

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.

9905170161

BK1990PG0652