

Return Address:

MT. BAKER ROOFING, INC.
5459 Hannegan Rd.
Bellingham, WA 98226



199912010083

Kathy Hill, Skagit County Auditor
12/1/1999 Page 1 of 2 2:34:15PM

CLAIM OF LIEN

Indexing information required by the Washington State Auditor's/Recorder's Office. (RCW 36.18 and RCW 65.04) 1/97: (please print last name first)

Reference # (If applicable): _____

Grantor(s) (Owner): (1) _____ (2) _____ Add'l. on pg _____

Grantee(s) (Claimants): (1) MT Baker Roofing Inc (2) _____ Add'l. on pg _____

Legal Description (abbreviated): Bayhill Village Div 1 Lot 23 Add'l. legal is on page _____

Assessor's Property Tax Parcel / Account # 4551-000-023-0002 Parcel # P-95874

MT Baker Roofing Inc
Claimant

vs.

Community Corp / Charlie Gliege
Name of person indebted to Claimant

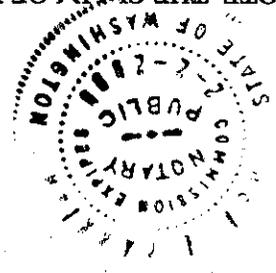
Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

- NAME OF LIEN CLAIMANT: MT Baker Roofing Inc
TELEPHONE NUMBER: 360-348-2135 ADDRESS: 5459 Hannegan Rd Bellingham, wa 98226
- 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: August 13 1999
- NAME OF PERSON INDEBTED TO THE CLAIMANT: Community Corp / Charlie Gliege
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): Lot #23 Bayhill Village Division 1 Lot 23
- NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Charlie Gliege
TELEPHONE NUMBER: 425-348-4850 ADDRESS: 12514 Meridian Ave SE #1 Everett, wa 98208
- 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: September 8 1999





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.



Date this 1st day of December, 1999
Print Name Heidi Parrish
Notary Public in and for the State of Washington
My appointment expires: 2-2-2000

Wanda Johnson
Vice President
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.

STATE OF WASHINGTON
County of Whatcom
Diana Johnson

}
SS.

Claimant MT Baker Logging, Inc
Print or Type Name Shirley Sturgeon Rd
Address Bellinckham Wa 98006
Telephone Number 360-398-2135

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$677,52 plus interest
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: