PLEASE RECORD AND RETURN TO: LienData USA, Inc. Agents For P.O. Box 1120 Bothell, WA 98041-1120 199912230058
Kathy Hill, Skagit County Auditor
12/23/1999 Page 1 of 2 10:41:57AM

GALE INDUSTRIES, INC.

DBA: SONO-THERM INSULATION,

CLAIMANT,

VS.

ROGER W HELGESON,

Person or Persons

Indebted to Claimant,

CLAIM OF LIEN
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:

1. NAME OF LIEN CLAIMANT:

ADDRESS:

TELEPHONE NUMBER:

Gale Industries, Inc. dba: Sono-Therm Insulation P.O. Box 225

Marysville, WA 98270

(360) 659-7674

- 2. 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: July 15, 1999
- 3. NAME OF PERSON INDEBTED TO CLAIMANT:
 Roger W. Helgeson
 P.O. Box 441
 Burlington, WA 98233
- 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (Street address, legal description or other information that will reasonably describe the property): CEDAR RIDGE ESTATES DIV 1 CEDAR RIDGE ESTATES DIV 1, LOT 22

Commonly Known As: Parc. #P105721

21430 Blue Jay Pl.

Mount Vernon, Skagit County

Washington

5. NAME OF THE OWNER OR REPUTED OWNER:
Barry & Sherry Verrall
800 Hilynn Dr.
Burlington, WA 98233

- 6. 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: October 1, 1999
- 7. PRINCIPAL AMOUNT FOR WHICH THE LIEN
 IS CLAIMED IS: \$640.00 plus interest
 plus filing fees
- 8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: Not Applicable.

DATED this 21st day of December, 1999.

LienData USA, Inc. AGENT FOR CLAIMANT P.O. BOX 1120 Bothell, WA 98041-1120

Gale Industries, Inc. dba: Sono-Therm Insulation CLAIMANT P.O. BOX 225 Marysville, WA 98270 (360) 659-7674

STATE OF WASHINGTON)

COUNTY OF KING)

Jackie Coghlan, 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.

Jackie Coghlan

SUBSCRIBED AND, SWORN to before me this 21st day of December, 1999

WASHING.

Heather Glanville
NOTARY PUBLIC in and for the
State of Washington
residing at Lynnwood.
My Commission expires: 12/25/01

199912230058
Kathy Hill, Skagit County Auditor
12/23/1999 Page 2 of 2 10:41:57AM