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Kathy Hill, Skagit County Auditor
6/14/2000 Page 1 of 2 2:32:56PM

Return Address:

MT Baker Roofing Inc
5459 Hannegan Rd
Bellingham, WA 98206**RELEASE 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): 200005110085Claimant: (1) MT Baker Roofing Inc (2) _____ Addl'. on pg _____Owner/Agent: (1) Kenneth Landers (2) Traditional Home Care Addl'. on pg _____Legal Description (abbreviated): Styleline #7 Lot #06 AnacortesAddl'. legal is on pg _____ Assessor's Property Tax Parcel / Account # P 59606MT Baker Roofing Inc Claimant

vs.

Traditional Home Care Defendant

KNOW ALL PERSONS BY THESE PRESENTS, that a certain Lien, claimed by Lien Notice filed and recorded in the office of the County Auditor of Skagit County, Washington, on the 11 day of may, 2000, recorded in Record of Liens, Volume No. _____, Page No. _____ by the above named claimant against the above named defendant, for the sum of FIVE thousand + 980 plus int Dollars (\$ 5,000.00 plus int), upon the following property:

is paid and satisfied, and the same is hereby released.

Witness my hand this 11 day of, June 2000.

Witnesses

Claimant(s)

Glenn Fisher
of MT Baker Roofing Inc

Release of Lien

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MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.



IN WITNESS whereof I have hereunto set my hand and affixed my official seal the day and year first above written.

Terri Van Dyke
Print Name

Notary Public in and for the State of Washington

My appointment expires: 12-15-2003

On this 14 day of June, 2000, personally appeared before me Sharon to me known to be the VICE PRESIDENT of the corporation that executed the within and foregoing instrument, and acknowledged said instrument to be free and voluntary act and deed, of said corporation, for the uses and purposes therein mentioned, and on oath stated that she is authorized to execute said instrument and that the seal affixed is the corporate seal of said corporation.

STATE OF WASHINGTON,
County of Whatcom }
SS. (CORPORATE ACKNOWLEDGEMENT)

Print Name

Notary Public in and for the State of

My appointment expires:

I certify that I know or have satisfactory evidence that _____
person who appeared before me, and said person acknowledged that _____ signed this instrument and acknowledged it to be
free and voluntary act for the uses and purposes mentioned in the instrument.

STATE OF WASHINGTON,
County of _____ }
SS. (INDIVIDUAL ACKNOWLEDGEMENT)

Dated this _____ day of _____