



200009110035

Skagit County Auditor

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Return Address:

Kern Funeral Home
1122 S. 3rd Street
Mount Vernon, Washington 98273

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) Diana H. Blankenship (2) _____ Add'l. on pg _____

Grantee(s) (Claimants): (1) Kern Funeral Home (2) LeRoy A. Anderson, Pres. Add'l. on pg _____

Legal Description (abbreviated): Greenstreet Add. Sedro Woolley Loy U Add'l. legal is on page _____

Assessor's Property Tax Parcel /Account # P 76457

Kern Funeral Home } Claimant
vs.
Diana H. Blankenship }
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:

1. NAME OF LIEN CLAIMANT: Kern Funeral Home/LeRoy A. Anderson, Pres.
TELEPHONE NUMBER: 360-336-2153 ADDRESS: 1122 S. 3rd Street
Mount Vernon, Washington 98273
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: March 1, 2000
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Diana H. Blankenship
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 701 Greenstreet Blvd
Sedro Woolley, Washington 98284 Greenstreet Add. to Sedro Woolley
Lot II
5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Diana H. Blankenship
TELEPHONE NUMBER: 360-856-1459 ADDRESS: 701 Greenstreet Blvd.
Sedro Woolley, Washington 98284
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: March 1, 2000



7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$3,090.29 plus interest at 12% per annum
from 4/1/2000.

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: Kern Funeral Home
/LeRoy A. Anderson, Pres.

LeRoy A. Anderson
Claimant
LeRoy A. Anderson, Pres/Kern Funeral Home
Print or Type Name
1122 S. 3rd Street
Address
Mount Vernon, Washington 98273
360-336-2153
Telephone Number

STATE OF WASHINGTON

County of Skagit } SS.
LeRoy A. Anderson

, 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 11TH day of September 2000.

Constance L. LeSourd
Print Name Constance L. LeSourd

Notary Public in and for the State of WA

My appointment expires: 3/4/2003

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.



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, Skagit County Auditor

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