



200010250028

, Skagit County Auditor

10/25/2000 Page 1 of 2 9:38:02AM

Return Address:

Insulpro Specialties
17661- 128th PI NE
Woodinville WA 98072

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): <u>20005310096</u>		
Claimant: (1) _____	(2) _____	Addl. on pg _____
Owner/Agent: (1) _____	(2) _____	Addl. on pg _____
Legal Description (abbreviated): <u>Skyline #7 Lot 26</u>		
Addl. legal is on pg _____ Assessor's Property Tax Parcel /Account # <u>59606 / 3823-000-026-0009</u>		

Insulpro Specialties
Claimant

vs.

Traditional Home Constr
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, on the 31 day of May, 2000, recorded in Record of Liens, Volume No. 20000531, Page No. 0096 by the above named claimant against the above named defendant, for the sum of Twenty Four Hundred Seventy Three Dollars (\$ 2473.00), upon the following property:

Skyline #7 Lot 26

5509 Doon Way

59606 / 3823-000-026-0009

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

Witness my hand this 23 day of, October, 2000.

Witnesses

Claimant(s)

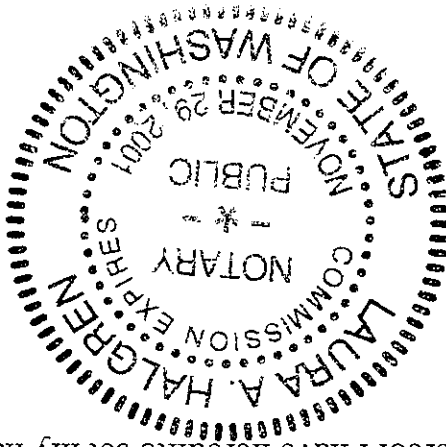
Jerry D. Masters
General Manager



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.
Print Name Laura A. Halgren
Notary Public in and for the State of WA
My appointment expires: 11-29-2001

On this 23 day of October, 2000, personally appeared before me Jerry maders to me known to be the owner 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 he authorized to execute said instrument and that the seal affixed is the corporate seal of said corporation

SS. (CORPORATE ACKNOWLEDGEMENT)

STATE OF WASHINGTON,
County of King

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.

SS. (INDIVIDUAL ACKNOWLEDGEMENT)

STATE OF WASHINGTON,
County of _____

