

CLAIM OF LIEN - ATTORNEYS FEES AND COSTS

STEPHEN C. SCHUTT, claimant, vs MARGARET R. DAVIS ESTATE, name of person indebted to claimant:

Notice is hereby given that the person named below claims a lien pursuant to *chapter 64.04 RCW. In support of this lien the following information is submitted:

- 1. NAME OF LIEN CLAIMANT: Stephen C. Schutt
 Attorney, WSBA #14107
 TELEPHONE NUMBER: (360) 293-5094
 ADDRESS: 1011 8th Street, PO Box 1032
 Anacortes, WA 98221
- 2. THIS IS A CLAIM FOR PROFESSIONAL SERVICES.
- 3. NAME OF PERSON INDEBTED TO THE CLAIMANT: The Estate of Margaret R. Davis, Skagit County Cause No. 00-4-00219-0
- 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (Street address, legal description or other information that will reasonable describe the property):

1308 - 6th Street, Anacortes, Washington Lot 18 Blk 102 17 & W 1/2 18 City of Anacortes Tax ID # P55659/3772-102-018-0004

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown") The Estate of Margaret R. Davis

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6. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: Two Thousand Three Hundred Seventy Four and 00/100 (\$2,374.00) Dollars along with interest at a reate of 12% per cent per annum.

IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO

STATE HERE: n/a

Stephen C. Schutt, WSBA #14107

P.O. Box 1032

Anacortes, WA 98221

STATE OF WASHINGTON

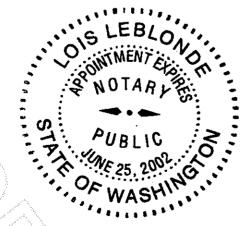
) SS

COUNTY OF SKAGIT

Stephen C. Schutt, 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.

Stephen C. Schutt

SUBSCRIBED AND SWORN to before me this 16 day of lipid, 2001.



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NOTARY PUBLIC in and for the

State of Washington

My appointment expires: 6-25-02

, Skagit County Auditor 4/17/2001 Page

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