

6/12/2003 Page

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2 10:11AM

AFTER RECORDING RETURN TO:

P. O. BOX 148 MARYSVILLE, WA 98270

CLAIM OF LIEN

OSO LUMBER, INC.

Claimant.

VS

MATT JANES CONSTRUCTION

(Name of person indebted to claimant)

NOTICE IS HEREBY GIVEN that the person 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: OSO LUMBER, INC. TELEPHONE NUMBER: (360) 435-8397

ADDRESS: 21015 S.R. 9 N.E., ARLINGTON, WA. 98223

- 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: NOVEMBER 12, 2002
- 3. NAME OF PERSON INDEBTED TO THE CLAIMANT: MATT JANES CONSTRUCTION, 23655 BULSON RD, MT VERNON, WA. 98274
 - 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED: ADDRESS: 13633 MARIHUGH RD, MT VERNON, WA.

LEGAL DESCRIPTION: LOT 3, SHORT PLAT NO. 95-033, AS RECORDED UNDER AUDITOR FILE NO. 9512130040, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 32, TOWNSHIP 35, RANGE 4 EAST, W.M.

SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P108652

- 5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"): HENRY BOYD MASON JR. & TAMI L. MASON, 11453 BAYVIEW EDISON RD, #30, MT VERNON, WA. 98273
- 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: MAY 13, 2003
- 7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$24,598.16, PLUS \$250.00 LIEN FEES, (TOTAL \$24,848.16), PLUS INTEREST.

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A.

For, OSO LUMBER, INC., Claimart

21015 S.R. 9-N.E.

ARLINGTON, WA. 98223

(360) 435-8397

(Phone Number, Address, City/State of Claimant)

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

CATHY PHILLIPS, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, 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.

Cathy Phillips

On this day personally appeared before me, CATHY PHILLIPS, to me known to be the individual, described above, and who further, under oath, stated that he/she had read the claim set forth above, and based upon information provided knew the contents thereof, and believed the same to be true and correct, and that the claim was made with reasonable cause and was not frivolous, and further acknowledged to me that he/she signed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 11 day of June, 2003

PRINTED NAME: DAVID ELLIOTT

NOTARY PUBLIC

in and for the State of Washington.

Residing in: EVERETT

My commission expires: 1/30/06

Order #060563,

dated: 6/9/03

OF WASHING

