



200409300046

Skagit County Auditor

9/30/2004 Page

1 of

2 10:07AM

Return Address:

Dahlman Pump & Well DrillingP. O. Box 422Burlington, WA 98233**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): 200407060010Claimant: (1) Dahlman Pump & Well Drilling (2)

Addl'. on pg

Owner/Agent: (1) Chris Isaacson(2) Jill Isaacson

Addl'. on pg

Legal Description (abbreviated): NE $\frac{1}{4}$ NE $\frac{1}{4}$ S11 T35 R3EAddl'. legal is on pg Assessor's Property Tax Parcel /Account # P 33705

Dahlman Pump & Well Drilling

Claimant

vs.

Chris Isaacson

Defendant

Jill Isaacson

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 6 day of July, 2004, recorded in Record of Liens, Volume No. _____, Page No. _____ by the above named claimant against the above named defendant, for the sum of Thirty four hundred & sixty-eight dollars & eighty one Dollars (\$ 3468.81), upon the following property: _____ cents

NE $\frac{1}{4}$ NE $\frac{1}{4}$ S11 T35 R3EP 33705

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

Witness my hand this 29th day of, October

Witnesses

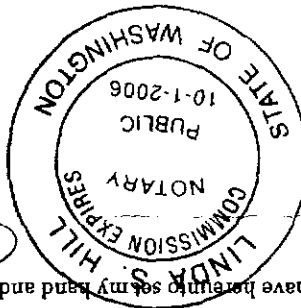
Claimant(s)



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.

On this 29th day of October, 2004,
personally appeared before me Walt J. Hill
to me known to be the 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 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 Skagit

My appointment expires: _____

Notary Public in and for the State of _____

Print Name _____

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

SS. (INDIVIDUAL ACKNOWLEDGEMENT)

STATE OF WASHINGTON,

County of _____