



200504130051
Skagit County Auditor

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Return Address:

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>200410050039</u>		
Claimant: (1) <u>RICK RICHTER</u>	(2) <u>R.A. RICHTER CONSTR</u>	Addl. on pg _____
Owner/Agent: (1) _____	(2) _____	Addl. on pg _____
Legal Description (abbreviated): <u>TR. 3 OF SP 91-0097 IN 7-33-5 EW, WL</u>		
Addl. legal is on pg _____ Assessor's Property Tax Parcel /Account # <u>330506-0-009-0209/P101330</u>		

RICK RICHTER

Claimant

vs.

DOUGLAS DULIN

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 13TH day of APRIL, 2005, recorded in Record of Liens, Volume No. _____, Page No. _____ by the above named claimant against the above named defendant, for the sum of _____ Dollars (\$ _____), upon the following property:

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

Witness my hand this 13TH day of APRIL 2005

Witnesses

Claimant(s)



Release of Lien
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MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.

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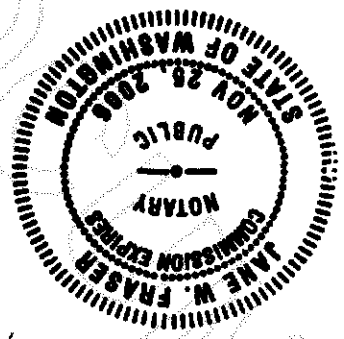
Print Name _____
Notary Public in and for the State of _____
My appointment expires: _____

IN WITNESS Whereof I have hereunto set my hand and affixed my official seal the day and year first above written.

On this _____ day of _____
_____ personally appeared before me
_____ of the _____
_____ to me known to be 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

STATE OF WASHINGTON, _____
County of _____
} SS. (CORPORATE ACKNOWLEDGEMENT)

Print Name _____
Notary Public in and for the State of _____
My appointment expires: _____



Dated this _____ day of _____
_____ 13th April 2005

I certify that I know or have satisfactory evidence that _____
_____ is the _____
_____ signed this instrument and acknowledged it to be
free and voluntary act for the uses and purposes mentioned in the instrument.

STATE OF WASHINGTON, _____
County of Skagit
} SS. (INDIVIDUAL ACKNOWLEDGEMENT)