



200509020163
Skagit County Auditor

9/2/2005 Page 1 of 2 4:04PM

Return Address:

Prairie Lane Association
4571 Prairie Lane
Sedro Woolley, WA 98284

CLAIM 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): _____

Grantor(s) (Owner): (1) Gregg Campbell (2) _____ Add'l. on pg _____

Grantee(s) (Claimants): (1) Prairie Lane Assc. (2) _____ Add'l. on pg _____

Legal Description (abbreviated): Tr #16 Prairie Lane Meadows Add'l. legal is on page _____

Assessor's Property Tax Parcel /Account # P50049

Prairie Lane Association }
Claimant
vs.
Gregg Campbell }
Name of person indebted to Claimant

Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

- NAME OF LIEN CLAIMANT: Prairie Lane Association
TELEPHONE NUMBER: 856-2878 ADDRESS: 4571 Prairie Lane
Sedro Woolley WA 98284
- 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: 6-16-2005
- NAME OF PERSON INDEBTED TO THE CLAIMANT: Gregg Campbell
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): Lot #16 Prairie Lane
Meadows, 4883 Prairie Lane, Sedro Woolley WA 98284
- NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Gregg Campbell
TELEPHONE NUMBER: _____ ADDRESS: 4883 Prairie Lane
Sedro Woolley, WA 98284
- 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: _____



7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: 125⁰⁰ + 12% per annum

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: —

Prairie Lane Association
Secretary James L. Shipley
Claimant
Prairie Lane Association
Print or Type Name
4571 Prairie Lane
Address
Sedro Woolley, WA 98284
360 856-2878
Telephone Number

STATE OF WASHINGTON }
County of Skagit } SS.

_____, 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.

Date this _____ day of _____

Print Name

Notary Public in and for the State of

My appointment expires: _____

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW



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