UNOFFICIAL DOCUMENT

200511040163
Skagit County Auditor
11/4/2005 Page 1 of 2 10:55AM

Return Address:
Western Concrete Pumping, INc.
2015 East Bakerview Road
Bellingham, WA 98226

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) Michael R. HOffman (2) Keri Hoffman Add'l. on pg ___

Grantee(s) (Claimants): (1) Western Concrete Pumping (2) Inc. Add'l. on pg ___

Legal Description (abbreviated): 10-34-01 Add'l. legal is on page ___

Assessor's Property Tax Parcel /Account # P68387

Western Concrete Pumping, Inc.
Claimant
vs.
Michael R. & Keri Hoffman
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:

1. NAME OF LIEN CLAIMANT: Western Concrete Pumping, INc.
TELEPHONE NUMBER: 360-671-5757 ADDRESS: 2015 E. Bakerview Road Bellingham, WA 98226

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: 07/18/05

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Michael R. & Keri Hoffman

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property):
13654 Orca Lane Anacortes, WA

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Michael Hoffman
TELEPHONE NUMBER: _____ ADDRESS: 4510 Kingsway Anacortes, WA 98221

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: 7/18/05

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

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: 1601.24

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

Western Concrete Pumping, INc.
Claimant
Arvin Zoerink
Print or Type Name
2015 E. Bakerview Road
Address
Bellingham, WA 98226

360-671-5757
Telephone Number

STATE OF WASHINGTON } SS.

County of Whatcom

ARVIN Zoerink, 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 2 day of November, 2005.

Nancy K. Reichel

Print Name NANCY K. REICHEL

Notary Public in and for the State of Washington

My appointment expires: 6-30-08

STATE OF WASHINGTON NANCY K. REICHEL NOTARY PUBLIC COMMISSION EXPIRES 06-30-08

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 CONTRIBU TION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDI

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