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2 8:57AM

LIEN RESEARCH CORP. P. O. BOX 148 MARYSVILLE, WA 98270

AFTER RECORDING RETURN TO:

CLAIM OF LIEN

CONCRETE NOR'WEST Claimant.

VS

SKAGIT REMODELING INC

(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: CONCRETE NOR'WEST TELEPHONE NUMBER: (253) 833-3705 ext. 405 ADDRESS: P.O. BOX 130, AUBURN, WA. 98071
- 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: MARCH 3, 2006
- 3. NAME OF PERSON INDEBTED TO THE CLAIMANT: SKAGIT REMODELING INC, PO BOX 1947, OAK HARBOR, WA. 98277
- 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:
 ADDRESS: 834 COOK RD, SEDRO WOOLLEY, WASHINGTON
 LEGAL DESCRIPTION: LOT 2 OF SEDRO WOOLLEY SHORT PLAT SW2659, RECORDED UNDER AUDITOR FILE NO. 200508120064, BEING A PORTION OF THE
 SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 23, TOWNSHIP
 35, RANGE 4, RECORDS OF SKAGIT COUNTY, WASHINGTON.
- SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P123198
- 5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"): JEREMY ROBERTSON, 111 SIOUX DRIVE, MOUNT 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: MARCH 3, 2006
- 7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$1,963.80 PLUS APPLICABLE LIEN FEES &/OR ATTORNEY'S FEES, &/OR INTEREST.

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

For, CONCRETE NOR'WEST, Claimant

P.O. BOX 130

AUBURN, WA. 98071

(253) 833-3705 ext. 405

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

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

DAVID ELLIOTT, 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.

On this day personally appeared before me, DAVID ELLIOTT, 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 23 day of March, 2006

PRINTED NAME: JUDY SARKIS

NOTARY PUBLIC

in and for the State of Washington.

Residing in: STANWOOD

My commission expires: 1/12/2010

Order #06-032407, dated: 3/23/2006

