

PLEASE RECORD AND RETURN TO:

LienData USA Agents For

P.O. Box 1643

Woodinville, WA 98072-1643



200702060061

Skagit County Auditor

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CLAIM OF LIEN

CB WHOLESALE, INC.,
CLAIMANT,
VS.
PENN COVE DRYWALL,
Person or Persons
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:

Owner: Gandini Rev Trust of 2004 and Peter L Gandini Trustee & Karin B Gandini Trustee

1. NAME OF LIEN CLAIMANT: **CB Wholesale Inc.**
ADDRESS: **801 West Orchard Ste 2**
Bellingham, WA 98225
TELEPHONE NUMBER: **(360) 738-3992**
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: **December 14, 2006**
3. NAME OF PERSON INDEBTED TO CLAIMANT:
Penn Cove Drywall
650 NE Otis St
Coupeville, WA 98239
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED: **3110 BUILDING CONDOMINIUM, UNIT 103**
Commonly Known As: **Parcel #P109129**
3110 Commercial Ave, Unit 103
Anacortes, Skagit County, Washington

30/35/2
Unit 103

5. NAME OF THE OWNER OR REPUTED OWNER:
Gandini Rev Trust of 2004
Peter L Gandini Trustee & Karin B Gandini Trustee
533 Skid Road
Lopez, Island, WA 98261
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: **December 14, 2006**
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN
IS CLAIMED IS: **\$4,738.44** PLUS INTEREST
PLUS LIEN FEES
PLUS COURT COST &
ATTORNEY FEES
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE
HERE: **Not Applicable**

DATED this 1st day of February, 2007.

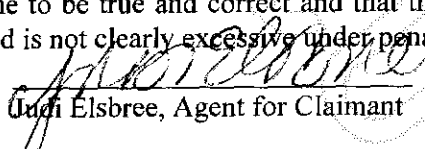
LienData USA
AGENT FOR CLAIMANT
P.O. Box 1643
Woodinville, WA 98072-1643

CB Wholesale, Inc.
CLAIMANT
801 West Orchard, Ste 2
Bellingham, WA 98225
(360) 738-3992

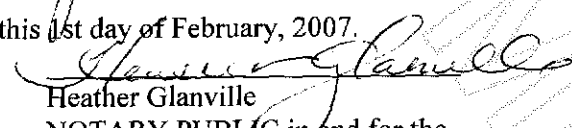
STATE OF WASHINGTON)
) ss.
COUNTY OF KING)

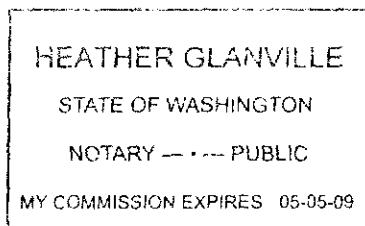
Judi Elsbree, being sworn, says:

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.


Judi Elsbree, Agent for Claimant

SUBSCRIBED AND SWORN to before me this 1st day of February, 2007.


Heather Glanville
NOTARY PUBLIC in and for the
State of Washington residing at Bothell
My Commission expires: 05/05/09



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