



200703270018
Skagit County Auditor

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Return Address:

Mount Vernon Carpet Center
PO Box 1166
Mount Vernon, WA 98273

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): 200610200145
Claimant: (1) Mount Vernon Carpet Center (2) Addl' on pg
Owner/Agent: (1) Debra Rudel (2) Addl' on pg
Legal Description (abbreviated): Lot 18 of Elk Run Estates
Addl' legal is on pg Assessor's Property Tax Parcel/Account # 4619-100-016-0005- P105068

Mount Vernon
Carpet Center

vs.

Debra Rudel

Claimant

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, Washington, on the 20th day of October, 2006, recorded in Record of Liens, Volume No. , Page No. , by the above named claimant against the above named defendant, for the sum of one thousand two hundred eighty-seven + 79/100 Dollars (\$ 1287.70), upon the following property:

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

Witness my hand this 26

day of,

March,

2007.

Witnesses

Claimant(s)



Release of Lien

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

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 _____
to me known to be the _____
personally appeared before me _____
of 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

SS. (CORPORATE ACKNOWLEDGEMENT)

STATE OF WASHINGTON,



Print Name Danielle Soren
Notary Public in and for the State of WASHINGTON
My appointment expires: 9-3-2009

I certify that I know or have satisfactory evidence that LISA NEUMAN signed this instrument and acknowledged it to be
person who appeared before me, and said person acknowledged that SHE signed this instrument and acknowledged it to be
free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 26th day of MARCH 2007

SS. (INDIVIDUAL ACKNOWLEDGEMENT)

STATE OF WASHINGTON,

County of SKAGIT