After recording return to: Frontier Building Supply Attn: Patricia Bickley 909 26th Street Anacortes, WA 98221



CLAIM OF LIEN

	vner of property erty is being liened):			
	me of lien claimant): Frontier Building Supply			
Abbreviated	Legal Description Lekcunton Acres Lot 7 Acres 1.00			
Assessor's Parcel/Accou				
	this Lien, the following information is submitted.			
1.	Name of Lien Claimant: Frontier Building Supply Address: 909 26th Street, Anacortes, WA 98221 Telephone Number: (360) 293-4595			
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:			
3.	Name of person or contractor indebted to claimant: Wayne Jamun aba Castade Tree Service			
4.	Description of the property against which a Lien is claimed (street address, legal description or other information that will reasonably describe the property): 835 Leken Lame Concrete			
<i>5</i> .	Name of the owner or reputed owner (if not known state "unknown"): James and Ann Innes			
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.	Principal amount for which the Lien is claimed is: \$ 1788.60 PB			

<i>∕</i> ∫∂8.	If cla	imant is the assignee of t	this claim so state here:		
	X	NO			
		YES. State name of Assig	gnor:		
		CLAIM.	ANT'S ATTESTATION		
STATE OF W	ASHIN				
COUNTY OF	Ska	git)			
H	<u>unci</u>	a Bickley	, being sworn, says: I am the claimant or a		
			t. I have read or heard the foregoing claim, read and		
			to be true and correct and that the claim of lien is not		
irivolous and is	s made	with reasonable cause, and	is not clearly excessive under penalty of perjury.		
			Name and Title of Person Signing for Claimant		
ACKNOWLE	DGMF	ENT OF	Name and True of Ferson Signing for Claimant		
		MANT'S SIGNATURE			
		ersonally appeared before n			
			xecuted the foregoing instrument, and acknowledged that		
			imant signed the same as his or her free and voluntary act		
this da			ioned. Given under my hand and official seal		
tinsda	y 01 <u> </u>	,2.0			
		·			
			Printed Name:		
			NOTARY PUBLIC in and for the State of Washington		
			Residing at:		
÷			My commission expires:		
ACKNOWLE	DGME	ENT OF			
CORPORATE CLAIMANT'S SIGNATURE					
On this	20h	"day of August ,	20, before me personally		
appeared HH	1195	X-BICKLUP	, to me known to be the (president, vice president,		
			r agent, as the case may be) of the corporation that		
			d acknowledged said instrument to be the free and		
			e uses and purposes therein mentioned, and on oath identification in the identification is the identification.		
corporate seal			ind instrument and that any scar attixed hereto is the		
			ny hand and affixed my official seal this day.		
			of residence of notary public).		
	million.	1111/1/1/	MICHALLY HIBLIAND		
į, i	1,611		Printed Name: VVYH I HIBINOUS		
11/1	C. WHI23		NOTARY PUBLIC in and for the State of Washington		
= = =	0 40		Residing at: AVOLOV 16 My commission expires: NOCO 13, 2010		
ST	PU	BLIC :	My commission expires. Och (17 137 One)		
	N. ARCH	THE RELEGIOUS CONTRACTOR AND			
~	WILL	ASHIMI	/ TAND KIN TAN TAN DAN TANTAN TAN TAN TAN TAN TAN TAN TAN DAN LA		
	'''!	Hica.	200709050004		
			Skagit County Auditor		

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