

AFTER RECORDING RETURN TO:

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



200804030008  
Skagit County Auditor

4/3/2008 Page 1 of 2 9:38AM

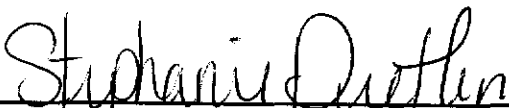
**CLAIM OF LIEN**

AMERICAN INSULATION  
Claimant.  
VS  
CASCADE TREE SERVICE, KEVIN  
JARMIN  
(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: AMERICAN INSULATION  
TELEPHONE NUMBER: (360) 403-8202  
ADDRESS: 6105 192ND ST NE, #2, ARLINGTON, WA. 98223
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 28, 2007
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: CASCADE TREE SERVICE, KEVIN JARMIN, 41722 MT. VIEW LANE, CONCRETE, WA. 98237
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:  
ADDRESS: 8195 LEKCIN LANE, CONCRETE, WA.  
LEGAL DESCRIPTION: LOT 2, LEKCINTON ACRES, RECORDS OF SKAGIT COUNTY, WASHINGTON.  
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P123379
5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"):  
DAVID SEFEROS, 27822 49TH AVE S, AUBURN, WA. 98001
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: JANUARY 23, 2008
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$3,408.48 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, AMERICAN INSULATION, Claimant  
6105 192ND ST NE, #2  
ARLINGTON, WA. 98223  
(360) 403-8202  
(Phone Number, Address, City/State of Claimant)

STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

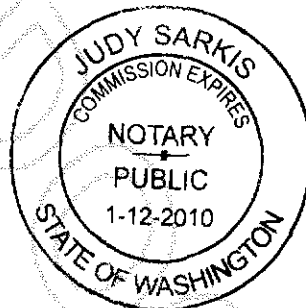
STEPHANIE DIETLIN, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

Stephanie Dietlin

On this day personally appeared before me, STEPHANIE DIETLIN, 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 31 day of March, 2008

Judy Sarkis  
PRINTED NAME: JUDY SARKIS  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: STANWOOD  
My commission expires: 1/12/2010



Order #08-032358, dated: 3/28/2008



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