

Van Beek Drywall, Inc 2121 King Street Bellingham, WA 98225

1/9/2009 Page

1 of

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CLAIM OF L	IEN			
Indexing inform Reference # (If a	nation required by the Washington State Auditor's/Recorder's Office, (RCW 36.18 and RCW 65.04) 1/97: applicable):			
Grantor(s) (Owner): (1) Munson Properties LLC (2) Add'l on pg				
Grantee(s) (Claimants): (1) Van Beele Drywatt, Inc. (2) Add'l on pg				
Legal Description	on (abbreviated): By Ridge Business Park BSP No. 00 -0154, DR 19 LOTIC Add'I legal is on page	-		
Assessor's Prope	erty Tax Parcel/Account # P118504 8034 - 000 - 003 - 0000			
Van Beek-	Drywall, \ac, Claimant, vs. Alan N. Perkes Const (name of person indebted to claimant by given that the person named below claims a lien pursuant to chapter 60.04 RCW.	ent)		
1.	Name of lien claimant: Van Beek Drywall, Inc. (Doug Van Beek) Telephone number: (360)647-8070 Address: 2121 King St. Bellingham, WA 98225			
2.	Date on which the claimant began to perform labor, provide professional services, supply mate or equipment or the date on which employee benefit contributions became due: 10/3/2008			
3.	Name of person indebted to the claimant: Alan N Perkes Construction 3001 OK Hwy 99 South, Suite #201, 194 Vernon, WA 98273			
4.	Description of the property against which a lien is claimed (street address, legal description or other information that will reasonably describe the property): 15806 Pres for Place Business Park BSP No 00-0154 Acres 0.57, DR.19 Lot 1 C Bay Ridge Business Park BSP No 00-0154 AF# 200111290			
5.	Name of the owner or reputed owner (If not known state "unknown"): Munsen Properties LLC Telephone number: Address: 18130 Sunset Way Edmands, WA 98026			
6.	The last date on which labor was performed professional services were furnished; contribution an employee benefit plan were due; or material, or equipment was furnished:	s to		
7.	Principal amount for which the lien is claimed is: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
8.	If the claimant is the assignee of this claim so state here:	4		

STATE OF WASHINGTON COUNTY OF Washington Ss: Design 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. Sign Name Signed and sworn to before me on this Aday of January Sign Name		Van Beek Drywel, Inc Claimant
STATE OF WASHINGTON COUNTY OF Washington Self pender 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. Sign Name Sign Name Sign Age Sign Name Sign Name Sign Name Washington Notary Public in and for the State of Washington My appointment expires: 9-3-11		Doug Van Beck Print or Type Name
STATE OF WASHINGTON COUNTY OF Washington Ss: COUNTY OF Washington Ss: Day Van Boek Self Self Self Self Self Self Self Self		2121 King St Address
STATE OF WASHINGTON COUNTY OF Washing 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. Sign Name Sign Name Sign Name Sign Name FENWick Print Name Lisa R. Fenwick Notary Public in and for the State of Washington My appointment expires: 9-3-11		Bellingham, WA 98225
Dug Van Bock 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. Sign Name Sign Name Sign Name Print Name Lisa R. Fenwick Notary Public in and for the State of Washington My appointment expires: 9-3-11		
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Sign Name	Dug Van Boek, be administrator, representative, or agent of the trust	ees of an employee benefit plan) above named; I have read or
Sign Name Sign Name Aday of January, 2009. Sign Name Sign Name Sign Name Aday of January, 2009. Sign Name Frint Name Sign Name Aday of January, 2009. Print Name Lisa R Fenwick Notary Public in and for the State of Washington My appointment expires: 9-3-11	the claim of lien is not frivolous and is made with	reasonable cause, and is not clearly excessive under penalty of
Sign Name Jua R Jenwich Print Name Lisa R Fenwick Notary Public in and for the State of Washington My appointment expires: 9-3-11	perjuly.	Sign Name
Print Name Usa R Fenwick Notary Public in and for the State of Washington My appointment expires: 9-3-11	Signed and sworn to before me on this _	9 day of January, 2009.
Notary Public in and for the State of Washington My appointment expires: 9-3-11		Sign Name Sisa R Jenurch
Notary Public in and for the State of Washington My appointment expires: 9-3-11		Print Name Usa R Fenwick
My appointment expires: 9-3-11	R FENWAR	
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