



200909210141
Skagit County Auditor

After recording, return to (Name, Address, Zip):

CLAIM OF LIEN	
Grantor (Name of person indebted to Claimant):	John Bartlett
Grantee (Claimant):	Russ Rether DBA Rether Company
Abbreviated Legal Description:	WR E12 12-54-1E
Assessor's Property Tax Parcel or Account No:	P17229
Reference No(s) of Related Documents:	

Russ Rether

Claimant,

vs. John Bartlett

Name of person indebted to Claimant..

Notice is hereby given that the person named below claims a lien pursuant to Chapter 64.04 RCW. In support of this lien the following information is submitted:

- Name of Lien Claimant: Russ Rether
Telephone Number: 360-410-5841 Address: 8724 Northwood Rd
Lynden, WA 98264
- 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: 9-14-09
- Name of person indebted to the Claimant: John Bartlett
- Description of the property against which a lien is claimed, (Street address, legal description or other information that will reasonably describe the property): WR E12 12-54-1E
- Name of the owner or reputed owner (If not known state "unknown"): John Bartlett
- The last date on which labor was performed; professional services were furnished; or contributions to an employee benefit plan were due; or material or equipment was furnished: 9-3-09

(OVER)



Skagit County Auditor

20090210141



My appointment expires March 4, 2012
Notary Public for Washington

Megan Johnson

SIGNED AND SWORN TO before me on September 21, 2009

[Signature]

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.

Rory Butler

County of Skagit

STATE OF WASHINGTON

ss.

CITY Lynden WA STATE WA ZIP 98264 PHONE 1-360-910-6811

STREET ADDRESS 87941 Northwood Rd

CLAIMANT'S NAME (TYPED OR PRINTED) Rory Butler

CLAIMANT [Signature]

8. If the Claimant is the assignee of this claim so state here: Rory Butler

7. Principal amount for which the lien is claimed is: \$20,000.00



UNOFFICIAL COPY