



201002170024

Skagit County Auditor

2/17/2010 Page 1 of 3 10:05AM

Return Address:

Lemley Chapel, Inc.

1008 Third Street

Sedro-Woolley, WA 98284

CLAIM 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): _____		
Grantor(s) (Owner): (1) _____	(2) _____	Add'l. on pg _____
Grantee(s) (Claimants): (1) _____	(2) _____	Add'l. on pg _____
Legal Description (abbreviated): <u>Lt 5 Blk 1 Roseade Garden TRS</u>		Add'l. legal is on pg _____
Assessor's Property Tax Parcel /Account #: <u>eta1 - see attached</u>		

Lemley Chapel, Inc.

Claimant

Glen A. & Shirley A. Latting

Name of person indebted to Claimant:

Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

- NAME OF LIEN CLAIMANT: Lemley Chapel, Inc.
TELEPHONE NUMBER: 360-855-1288 ADDRESS: 1008 Third St.
Sedro-Woolley, WA 98284
- 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: January 11, 2010 and January 26, 2010
- NAME OF PERSON INDEBTED TO THE CLAIMANT: Glen A. & Shirley A. Latting
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property) 213 N. Murdock St., Sedro-Woolley, WA 98284, P76860
- NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): Glen A. & Shirley A. Latting (Deceased)
TELEPHONE NUMBER: _____
ADDRESS: _____
- 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: Funeral Services for Shirley Latting on January 15, 2010
and Funeral Services for Glen Latting on February 1, 2010

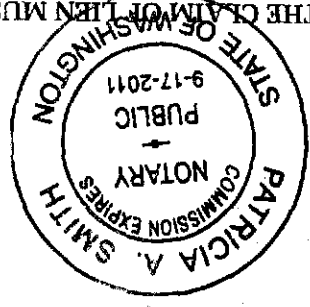


Claim of Lien

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

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.



Date this 10 day of February, 2010
Print Name Patricia A. Smith
Notary Public in and for the State of Washington
My appointment expires: Sept 17, 2011

claimant, or administrator, representative, or agent of the trustee 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.
Richard E Lemley

being sworn, says: I am the claimant (or attorney of the
County of Skagit
SS. }
STATE OF WASHINGTON

Telephone Number 360-855-1288
Address Sedro-Woolley, WA 98284
Print or Type Name 1008 Third Street
Claimant Rick Lemley
Lemley Chapel, Inc.

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$9,789.33
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: Lemley Chapel, Inc.

