



201102080045

Skagit County Auditor

2/8/2011 Page

1 of

2 2:38PM

Recording requested by: _____

Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: LACONNER PARTNERS LLC

Name _____

Address: P.O. Box 19

Address _____

City/State/Zip: LACONNER, WA. 98257

City/State/Zip _____

Claim of Lien

State of WASHINGTON

County of SKAGIT

I, R. A. RENNEBOHM, being duly sworn, state the following:

In accordance with an agreement to provide labor and/or material, I did furnish the following labor and/or materials:

on the following described real property located in SKAGIT County, State of WASHINGTON, commonly known as:

327 N. First ST.

and legally described as: P74251 JOHANSON'S 1st to LACONNER N 37 ft Lot 2 Bk 4

which property is owned by RON RENNEBOHM, whose address is 10310 FARM TO MARKET Rd, of a total value

of \$ 400,000, of which there remains unpaid \$ 400,000, and I further state that I furnished the first of the items on the date of 1-21-2010, and the last of the items on

the date of 11/15/2010

I hereby, under the laws of the State of WASHINGTON, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.

R.A. Rennebohm

Signature of Person Claiming Lien

Name of Person Claiming Lien

Address of person claiming lien:

On 2-8-2011, R.A. Rennebohm came before me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.

Susan A Kelley

Notary Signature

Notary Public,

In and for the County of Skagit State of WA

My commission expires: 7-1-2014

Seal

CERTIFICATE OF MAILING

I, _____, certify that on this date, _____, I have mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with the law, to:

Name: _____

Address: _____

Date: _____

Signature of Person Mailing Claim of Lien



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