



201103210168  
Skagit County Auditor

3/21/2011 Page 1 of 2 1:10PM

AFTER RECORDING RETURN TO:

LIEN RESEARCH CORP.  
P.O. BOX 3409  
ARLINGTON, WA 98223

### CLAIM OF LIEN

BAYWOOD CABINET, INC  
Claimant.  
VS  
RAVEN NW  
(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 Claimant: BAYWOOD CABINET, INC  
Telephone Number: (425) 251-9611  
Address: 18519 EAST VALLEY RD, KENT, WA. 98032-1225

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: NOVEMBER 30, 2010

3. Name of person indebted to the Claimant: RAVEN NW, 11952 CANYON RIDGE DR, ANACORTES, WA. 98221

4. Description of the property against which a lien is claimed:  
Address: 11952 CANYON RIDGE DR, ANACORTES, WA.

Legal Description: LOT Z, FIDALGO BAY ADDITION TO ANACORTES MAP OF AGGREGATION, RECORDED IN VOLUME 12 OF SURVEYS, PAGES 147 AND 148, UNDER AUDITOR'S FILE NO. 9204200040, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF BLOCKS 15 THROUGH 32, FIDALGO BAY ADDITION TO ANACORTES, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 2 OF PLATS, PAGE 24, RECORDS OF SKAGIT COUNTY, WASHINGTON.

SKAGIT County Assessor's Tax Parcel No. P60740

5. Name of owner or reputed owner (if not known state "unknown"):  
TRACY WILLIS & RICHARD BIHON, 11952 CANYON RIDGE DR, ANACORTES, WA. 98221

6. The last date on which labor was performed, professional services were furnished; contributions to an employee benefit plan were due on material, or equipment was furnished: DECEMBER 21, 2010

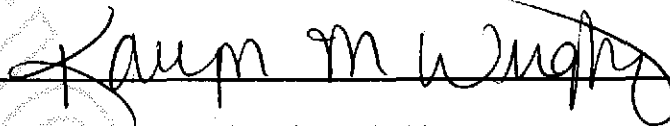
7. Principal amount for which the lien is claimed: \$1,790.33, plus applicable lien fees &/or attorney's fees, &/or interest.

8. If the Claimant is the assignee of this claim so state here: N/A.

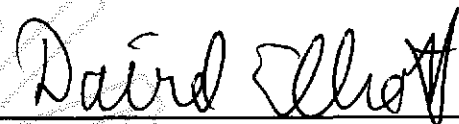
Lien Research Corp.  
By: Kaun Mung  
It's Authorized Representative/Employee,  
As Authorized agent of BAYWOOD CABINET, INC, Claimant  
18519 EAST VALLEY RD,  
KENT, WA. 98032-1225  
(425) 251-9611

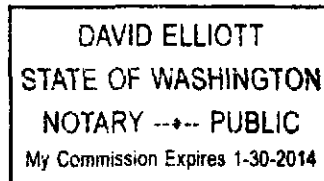
STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

KARYN M WRIGHT, being sworn, says: I am an authorized representative/employee of 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.



Subscribed and sworn to before me this 16 day of March, 2011

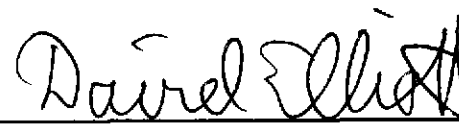
  
PRINTED NAME: DAVID ELLIOTT  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: EVERETT  
My commission expires: 1/30/2014

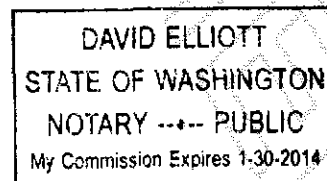


STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

On this 16 day of March, 2011, before me personally appeared KARYN M WRIGHT, to me known to be the (president, vice president, secretary, treasurer, or other authorized officer or agent, as the case may be) of Lien Research Corp., a Washington corporation, that executed the within and foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he/she was authorized to execute said instrument and that the seal affixed is the corporate seal of said corporation.

In Witness Whereof I have hereunto set my hand and affixed my official seal the day and year first above written.

  
PRINTED NAME: DAVID ELLIOTT  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: EVERETT  
My commission expires: 1/30/2014



Order #11-030595, dated: 3/15/2011



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