



201105020035
Skagit County Auditor

5/2/2011 Page 1 of 3 9:56AM

RECORDING REQUESTED BY AND RETURN TO:

STONEWAY ELECTRIC SUPPLY C/O
LIENDATA USA
P O BOX 1643
WOODINVILLE, WA 98072

Telephone: (425) 481-1131

Fax: (425) 481-1139

APN # 3868-004-019-0006

NOTICE OF CLAIM OF LIEN

(RCW 60.04.091)

The undersigned claimant, STONEWAY ELECTRIC SUPPLY C/O LIENDATA USA, hereby claims a construction lien as follows:

The name and address of the person performing labor or furnishing material is STONEWAY ELECTRIC SUPPLY C/O LIENDATA USA, P O BOX 1643, WOODINVILLE, WA 98072.

The time of the commencement of performance of labor or the furnishing of materials was 02/01/2011. The time of the cessation of performance of labor or the furnishing of materials was 02/01/2011.

The name of the person by whom the claimant was employed, or to whom the claimant furnished the material is RHEMA ELECTRIC, 1404 RIVERSIDE DR STE F, MOUNT VERNON, WA 98273.

The name of the owner, or reputed owner, is LYNN TRAVIS, 41631 CAPE HORN DR, CONCRETE, WA 98237.

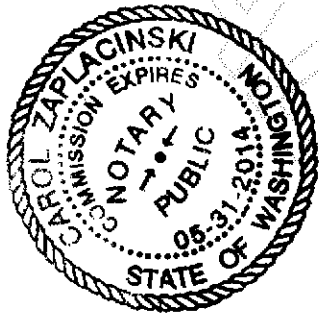
A description of the property to be charged with the lien is the project, located at 41631 CAPE HORN DR, CONCRETE, WA, Assessors or Property Parcel Number: 3868-004-019-0006, in the County of SKAGIT, as further described below:

LEGAL: LOT 19, BLOCK D, CAPE HORN ON THE SKAGIT, ACCORDING TO THE PLAT THEREOF, RECORDED IN VOLUME 8 OF PLATS, PAGE 92 THROUGH 97, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATED IN SKAGIT COUNTY, WASHINGTON.

State of Washington)
County of King) ss.

I certify that I know or have satisfactory evidence that Steven Hopkins is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument, on oath stated that (he/she) was authorized to execute the instrument and acknowledged it as the Credit Manager for Stoneway Electric Supply to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

SUBSCRIBED AND SWORN TO before me this 19 day of April, 2011.



Carol Zaplacinski
Print Name:
NOTARY PUBLIC
Residing at: Stoneway
My commission expires: 05/31/14
Job Number # _____



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