UNOFFICIAL DOCUMENT

200508080169
Skagit County Auditor
8/8/2005 Page 1 of 2 2:00PM

Return Address:
Darin Brewer
17219 West Big Lake Blvd
mt-Vernon, WA 98274

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) Robin L Hartzell (2) _____ Add'l. on pg ___
Grantee(s) (Claimants): (1) Rocky Creek Alliance (2) _____ Add'l. on pg ___
Legal Description (abbreviated): P72842 - Umbarger Trucks TR3 DR12 Add'l. legal is on page ___
Assessor's Property Tax Parcel /Account # 4095-000-003-0005

Rocky Creek Alliance
Claimant
vs.
Robin L. Hartzell
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:

1. NAME OF LIEN CLAIMANT: Rocky Creek Alliance
TELEPHONE NUMBER: (360)421-5793 ADDRESS: 17719 West Big Lake Blvd
mt.Vernon, WA 98274

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: 4/18/05

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Robin L. Hartzell

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 1115 Curtis Ave
Burlington WA 98233 P72842
Umbarger Trucks TR3 DR12

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Robin L Hartzell
TELEPHONE NUMBER: _____ ADDRESS: 1115 Curtis Ave
Burlington WA 98233

6. 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: 7/12/05

©Washington Legal Blank, Inc., Issaquah, WA Form No. 90 10/98
MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.
www.wlbforms.com

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: $8,232.

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: yes

Rocky Creek Alliance
Claimant

Darin R Brewer (member)
Print or Type Name

17719 West Big Lake Blvd
Address

Mt. Vernon, WA 98274

(360) 421-5793
Telephone Number

STATE OF WASHINGTON }
County of Skagit } ss.

Darin R Brewer (member), being sworn, says: I am the 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.

[signature]

Signed and sworn to before me on this 3 day of August 2005

[signature]

Print Name Bonnie K. Irish

Notary Public in and for the State of Washington

My appointment expires: 5/19/07

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.

Claim of Lien
©Washington Legal Blank, Inc., Issaquah, WA Form No. 90 10/98
MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.
www.walegalblank.com

200508080169
Skagit County Auditor
8/8/2005 Page 2 of 2 2:00PM

UNOFFICIAL DOCUMENT