Prepared by, recording requested by and return to:

Name:
Company:
Address:
City:
State: Zip:
Phone:
Fax:

200708080072
Skagit County Auditor
8/8/2007 Page 1 of 4 1:23PM

----------Above this Line for Official Use Only----------

CLAIM OF LIEN--INDIVIDUAL

MICHAEL R. SHAW, Claimant

vs

RUSSEL MOLINE, [Name of person indebted to claimant]

Notice is hereby given that the person named below claims a lien pursuant to RCW 60.04.100. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: MICHAEL R. SHAW

   TELEPHONE NUMBER: 425 880-4265

   ADDRESS: 28675 NE 63RD WAY

   CARNATION WA 98014

P60799 LTS 1-7, 21-28, BLK 22, N ANNEXES

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 WAS THE 15 DAY OF Dec, 20 06.

3. NAME OF PERSON INDEBTED TO THE CLAIMANT:

   RUSSEL MOLINE

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4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (Street address, legal description or other information that will reasonably describe the property):

7400 GLENCOE LN (See attached legal)
ANACORTES WA 98221
(ON GUEMES ISLAND)

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state Q "unknown"): RUSSEL MOLINE

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 WAS THE 15 DAY OF JUNE, 2007.

6. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS:

5000.00

7. IF THE CLAIMANT IS THE ASSIGNEEE OF THIS CLAIM, SO STATE HERE: _____

Signature

MICHAEL R SHAW
Name of Claimant

28675 NE 63RD WAY
Street Address

CARNATION WA 98014
City, State, Zip Code

425 880-4265
Phone Number

SHANNON NOOTE
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
8-28-2010

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STATE OF WASHINGTON
COUNTY OF Skagit

I certify that I know or have satisfactory evidence that Michael Shaw is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED: 8/8/07

Shawnon Rodenbaum
Notary Public

My appointment expires
08/20/2010

See page 2 for seal

UNOFFICIAL DOCUMENT

When Recorded Return to:
RUSSELL F. MOLINE
ZEEDIE COLLINS
1102 29th St.
Anacortes WA 98221

200106220099
, Skagit County Auditor
6/22/2001 Page 1 of 1 3:31:23PM

Island Title Company
Order No: A20709

STATUTORY WARRANTY DEED

THE GRANTOR THOMAS TOTTENHAM, as his separate estate

for and in consideration of Thirty-Five Thousand and 00/100...($35,000.00) DOLLARS

in hand paid, conveys and warrants to

RUSSELL F. MOLINE, a single person and ZEEDIE COLLINS, a single person

the following described real estate, situated in the County of Skagit, State of Washington:

Lots 1 Through 7 And Lots 21 through 28, Block 22, CITY OF NORTH ANACORTES, according to the plat thereof, recorded in Volume 3 of Plats, page 23, records of Skagit County, Washington;

Situated in Skagit County, Washington.

Tax Account No.: 3843-022-028-0007 P60799

Subject to: Restrictions, reservations and easements of record.

Dated: June 18, 2001

THOMAS TOTTENHAM

4533
SKAGIT COUNTY WASHINGTON
Real Estate Excise Tax
JUN 22 2001
Amount Paid $ 535.50
Skagit Co. Treasurer
By Deputy

STATE OF WASHINGTON
COUNTY OF Skagit

I certify that I know or have satisfactory evidence that THOMAS TOTTENHAM the person(s) who appeared before me, and said person(s) acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes therein mentioned in this instrument.

Dated: June 20 2001

Notary Public in and for the State of Washington
Residing at Anacortes
My appointment expires: 3-5-02

DIANE L VEER
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
MARCH 5, 2002

LPB No. 10

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