

~~Registered~~
~~Indexed, Sir~~
~~Abstract~~
~~Not Answered~~
~~Entered~~
~~Mailed~~

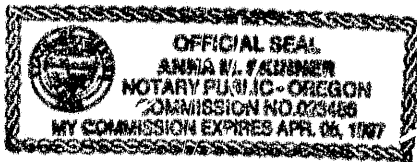
OREGON
STATE OF WASHINGTON, COUNTY OF Multnomah

89.

OFFICIAL SEAL
NOTARY PUBLIC - OREGON

Scott A. Higgins 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.

Subscribed and sworn to before me this 29th day of October, 1994



Anna W. Falkner
Notary Public in and for the State of Oregon

My appointment expires: 4/4/97

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.

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