

143459

BOOK 219 PAGE 365

FILED IN RECORD  
SKAMANIA COUNTY WASH

BY Phyllis Casey

JAN 17 10 52 AM '02

P. Casey

Return Address:

J. Michael Garvison

Skamania Landing Owners Assoc., Inc.PO Box 791Stevenson, WA 98648**CLAIM OF LIEN**

Indexing information required by the Washington State Auditor's/Recorder's Office, (RCW 36.10 and RCW 05.04) 1/02 (please print last name first)

Reference # (if applicable): 136930 195/337

Grantor(s) (Owner): (1) Dorsey, Arthur W (2) Dorsey, Christine Add'l. on pg. \_\_\_\_\_

Grantee(s) (Claimants): (1) Skamania Landing Owners Assoc. Inc Add'l. on pg. \_\_\_\_\_

Legal Description (abbreviated): Lot 3 Block 2 Woodard Marina Estates Add'l. legal description page: \_\_\_\_\_

Assessor's Property Tax Parcel / Account # 020634140680 00

Skamania Landing Owners Assoc.

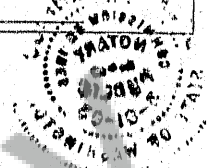
Claimant

VS.

Arthur W & Christine Dorsey

Name of person indebted to Claimant

Registered  
Lien  
Filed  
1/17/02



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:

- NAME OF LIEN CLAIMANT: SLOA  
TELEPHONE NUMBER: 427-4081 ADDRESS: PO Box 791  
Stevenson, WA 98648
- 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: December 1, 1999
- NAME OF PERSON INDEBTED TO THE CLAIMANT: Arthur W. & Christine Dorsey
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): Lot 3 Block 2 Woodard Marina Estates AKA Skamania Landing Owners Assoc. Inc Skamania County, Washington
- NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): A. W. & C. Dorsey  
TELEPHONE NUMBER: \_\_\_\_\_ ADDRESS: 2185 Eagle Sticks Dr.  
Henderson, NV 89012
- 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: Nov. 1, 2001



Claim of Lien

©Washington Legal Blank, Inc., Issaquah, WA Form No. 90 19/00

MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.

www.walgalblank.com

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: 3,000
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: \_\_\_\_\_

Skamania Lending Owners Assoc.

Claimant

Phyllis C Caley, Treasurer

Print or Type Name

Stovenson, WA 98648

Address

Telephone Number

STATE OF WASHINGTON

County of Skamania

SS.

Phyllis C Caley, 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.

Signed and sworn to before me on this

17<sup>th</sup>

day of

January

Debra A Tennant

Print Name

Notary Public in and for the State of WA

My appointment expires: 3/01/03

**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. 00 10/98

MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.

www.walegalblank.com