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FILED FOR RECORD
SKANAWA, WASH
BY Jackie A. Taylor

Mar 4 8 41 AM '02

J. Michael Garvison
AUDITOR

J. MICHAEL GARVISON

Return Address:

Jackie A. Taylor
4510 Brown's Ck. Rd.
The Dalles, OR, 97058Suggested
Ordering
Form
#100

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) Donald L. Taylor (2) Bonnette Family Trust Addl. on pg.

Grantee(s) (Claimants): (1) Jackie A. Taylor (2) Monica M. Garcia Addl. on pg.

Legal Description (abbreviated): Raxmable on Land Addl. legal is on page

Assessor's Property Tax Parcel /Account # 20-009490-01-05-04-0-0-0500-00

Jackie Alice Taylor

Claimant

vs.
Donald Lee Taylor

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: Jackie Alice Taylor
TELEPHONE NUMBER: (509) 296-6594 ADDRESS: 4510 Brown's Ck. Rd.
The Dalles, OR, 97058
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: 1992
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Donald Lee Taylor
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 82 Ranch Rd.
Mable home parcel # 20-009490 located on Bonnette
Family Living Trust parcel # 01-05-04-0-0-0500-00
5. NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): Donald L. Taylor
TELEPHONE NUMBER: (509) 772-3096 ADDRESS: 82 Ranch Rd, Washougal, WA,
98671 - Diane Juddes Clifton Az, TRUSTEE
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: 1-10-02



Claims of Lien
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7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: 20,000

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

Jackie A. Taylor
Claimant
Jackie A. Taylor
Print or Type Name
4510 Blawie's Crk. Rd.
Address
The Dalles, OR. 97058
(541) 296-6594
Telephone Number

STATE OF WASHINGTON

County of Skamania

SS.

JACKIE A. Taylor, 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 4 day of March 2002



Print Name

TERY L. MICKEL

Notary Public in and for the State of WASHINGTON

My appointment expires: 9-1-02

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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