

After Recording, Return to:

Medallion Industries, Inc.
3221 NW Yeon Ave.
Portland, OR 97210
503-221-0170

CLAIM OF LIEN

Reference # (If applicable): ***
Owners: Carson Mineral Hot Springs LLC
Legal Description: Carson Hot Springs, 21-3N-8E, According to the Plat thereof, As Recorded in
Skamania County Recorder's Office.
Assessor's Property Tax Parcel/Account # 03-08-21-00-0200-00

Medallion Industries, Inc.)
)
Claimant,)
)
vs.)
)
E & G Construction)
)
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: Medallion Industries, Inc.
TELEPHONE NUMBER: 503-221-0170
ADDRESS: 3221 NW Yeon Ave. Portland, OR 97210
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:
December 30, 2003.

3. NAME OF PERSON INDEBTED TO THE CLAIMANT:
E & G Construction.
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN
IS CLAIMED (street address, legal description or other information
that will reasonably describe the property): 372 St Martin Springs Rd,
Carson, WA
5. NAME OF THE OWNER OR REPUTED OWNER (If not known
state "unknown"): Carson Mineral Hot Springs LLC
TELEPHONE NUMBER:
ADDRESS: PO Box 1169 , Carson, WA 98610
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED
PROFESSIOINAL SERVICES WERE FURNISHED;
CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN
WERE DUE; OR MATERIAL, OR EQUIPMENT WAS
FURNISHED: November 3, 2004
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED
IS: \$6284.15 includes \$21 recording fee
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO
STATE HERE: ***

For Medallion Industries, Inc


Claimant

Timothy J Mahaffy, President
Print or Type Name

3221 NW Yeon Ave. Portland, OR 97210
Address

503-221-0170
Telephone Number

STATE OF OREGON)
) ss.
County of Multnomah)

I, Timothy J Mahaffy, being sworn, say: 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.


Timothy J. Mahaffy, President

SIGNED AND SWORN TO before me on this 11th day of November , 2004





Print Name: Barbara Rubrecht

Notary Public in and for the State of: Oregon

My appointment expires: December 04,2006