RETURN TO: David C. Kelly Peterson Russell Kelly PLLC 10900 N.E. 4th Street, Suite 1850 Bellevue, WA 98004-8431 Doc # 2005156828
Page 1 of 4
Date: 04/05/2005 01:32P
Filed by: PETERSON RUSSELL KELLY PLLC
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$22.00

CLAIM OF LIEN

Property Owner:

Hamilton Park Limited Partnership

Lien Claimant:

Milgard Manufacturing, Inc.

Legal Description:

LOTS C-49 AND C-50/ THIRD ADDITION NORTH BONNEVILE/ BLOCK 10/ BOOK B/ PAGE 34-35/ RECORDS OF SKAMANIA COUNTY, WASHINGTON.

Assessor's Property Tax No.:

02-07-29-2-2-2600-00

Milgard Manufacturing, Inc., claimant

vs.

Sideco, Inc. P.O. Box 277 Hubbard, OR 97032

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:

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1. NAME OF LIEN CLAIMANT:

TELEPHONE NUMBER:

ADDRESS:

Milgard Manufacturing, Inc.

503-682-3270

20789 S.W. 115th Street Tualatin, OR 97062

- 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:

 On or about January 6, 2005
- 3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Sideco, Inc.
- 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:

Site Address:

30 Portage Drive, North Bonneville, WA

Mailing Address:

30 Portage Drive, North Bonneville, WA

See above for legal description.

- 5. NAME OF THE OWNER OR REPUTED OWNER: Hamilton Park Limited Partnership
- 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: February 18, 2005
- 7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$17,082.72
- 8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM, SO STATE HERE:

MILLGARD MANUFACTURING, INC.

В́у:

David C. Kelly

Peterson Russell Kelly PLLC

Attorneys for Claimant

10900 N.E. 4th Street, Suite 1850

Bellevue, WA 98004-8341

425-462-4700

STATE OF WASHINGTON)	
)	SS
COUNTY OF KING)	

David C. Kelly, being sworn, says: I am the attorney for the claimant 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.

David C. Kelly

Bab Borio and sworn to before me this _____ day of April, 2005.

Notary Public for the State of Washington

STATE OF WASHINGTON)
) ss.
COUNTY OF KING

I certify that I know or have satisfactory evidence that David C. Kelly is the person who appeared before me, and said person acknowledged that he signed this instrument, on oath, stated that she was authorized to execute the instrument and acknowledge it as the attorney for the lien claimant, to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Residing at Kenton
My commission expires:

Dated: April ______, 2005.



)C# 2005156828 Np 4 of 4

AFFIDAVIT OF MAILING

STATE OF WASHINGTON) (N	
)	SS
COUNTY OF KING	Ì	

The undersigned, being first duly sworn on oath, deposes and says:

- 1. That she is now and at all times herein mentioned was a citizen of the United States and resident of the State of Washington, over the age of eighteen years, not a party to the above-entitled action and competent to be a witness therein.
- 2. That on the 4 day of April, 2005, she deposited in the mails of the United States of America, certified mail, return receipt requested, a properly stamped and addressed envelope containing a copy of the Claim of Lien addressed to:

Hamilton Park Limited Partnership 506 E. Seventh Avenue The Dalles, OR 97058 98043

Sideco, Inc. P.O. Box 277 Hubbard, OR 97032

DATED this 4 day of April, 2005

SUBSCRIBED AND SWORN to before me this 4 day of April, 2005.

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Name: Name:

My commission expires: 10-24-06