

Return Address:

Ken W Peterson Co. Inc  
PO Box 297  
N. Bonneville, WA 98689

Document Title(s) or transactions contained herein:

Claim of Lien

GRANTOR(S) (Last name, first name, middle initial)

Washington State Parks

☐ Additional names on page \_\_\_\_\_ of document.

GRANTEE(S) (Last name, first name, middle initial)

Ken W. Peterson Co. Inc.

☐ Additional names on page \_\_\_\_\_ of document.

LEGAL DESCRIPTION (Abbreviated: i.e., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)

☐ Complete legal on page \_\_\_\_\_ of document.

REFERENCE NUMBER(S) of Documents assigned or released:

☐ Additional numbers on page \_\_\_\_\_ of document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

02-06-00-0-0-1201-00

☐ Property Tax Parcel ID is not yet assigned

☐ Additional parcel numbers on page \_\_\_\_\_ of document.

The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.

AFTER RECORDING MAIL TO:

KEN W. PETERSON CO, INC  
P.O. BOX 297  
NORTH BONNEVILLE, WA 98639

KEN W. PETERSON CO, INC

-Claimant-

VS

WASHINGTON STATE PARKS

) Case No.:

)

) CLAIM OF LIEN

)

)

)

NOTICE IS HEREBY GIVEN THAT THE PERSON NAMED BELOW CLAIMS A LIEN PURSUANT TO CHAPTER 60.04RCW

In support of this lien, the following information is submitted:

NAME OF CLAIMANT: KEN W PETERSON CO, INC  
TELEPHONE NUMBER: 509-427-5953  
Address: P.O. Box 297, N Bonneville, WA 98639

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:  
May 26, 2005

NAME OF PERSON INDEBTED TO THE CLAIMANT:  
Brant Construction, Inc

DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:  
Retain age account held in escrow for the Beacon Rock State Park Day Use Development

NAME OF OWNER OR REPUTED OWNER:  
Washington State Parks, Finance and Construction Projects Division, 7150 Cleanwater lane, Olympia, WA 98504-2650.

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:  
June 16, 2005

PRINCIPLE AMOUNT FOR WHICH THE LIEN IS CLAIMED IS:

The following is a true statement of Claimant's demand after deducting all just credits and offsets, to-wit:

Principle amount due	\$9693.12
Interest at the rate of 1.5% per annum	\$428.66*
Plus lien costs in the amount of	\$250.00
<u>For a total of \$10,371.78</u>	

\*Beginning July 15, 2005 until paid.

TEN THOUSAND THREE HUNDRED SEVENTY ONE & 78/100-----  
DOLLARS

PLUS ANY ATTORNEY FEES, COURT COSTS AND WASHINGTON STATE SALES TAX AT THE APPLICABLE RATE.

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

Claimant is not an assignee of this lien claim.

STATE OF WASHINGTON, COUNTY OF  
SKAMANIA, SS.

DANIKA GOLDEN, 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 forgoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of the lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

Signed and sworn to me this 5<sup>th</sup> day of October, 2005

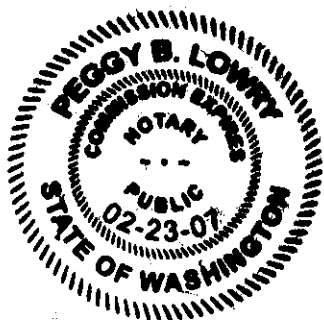
Print Name

Notary Public in and for the State of

My appointment expires

STATE OF WASHINGTON, COUNTY OF  
SKAMANIA, SS. (CORPORATE ACKNOWLEDGEMENT)

I certify that I know or have satisfactory evidence that DANIKA GOLDEN is the person who appeared before me, and said person acknowledged that she signed this instrument, on oath stated that she was authorized to execute the instrument and acknowledged it as the LIMITED AGENT of KEN W PETERSON CO, INC to be the free and voluntary act of such party for the uses and purposes mentioned in this instrument.



Peggy B Lowry  
Notary Public in and for the  
State of Washington