

FILED FOR RECORD AT THE  
REQUEST OF/RETURN TO:

**Katy J. Archer**  
**Woodrich & Archer LLP**  
**PO Box 510**  
**Stevenson, WA 98648**

Doc # 2006160411  
Page 1 of 3  
Date: 01/31/2006 03:07P  
Filed by: WOODRICH & ARCHER  
Filed & Recorded in Official Records  
of SKAMANIA COUNTY  
J. MICHAEL GARVISON  
AUDITOR  
Fee: \$34.00

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Grantor (s) **Joe Zumstein, Jr.**  
Grantee (s) **Shelley Moore**  
Additional Grantor(s) on page(s)  
Additional Grantee(s) on page(s)  
Abbreviated Legal: Lot 3 of Shelley Moore Short Plat  
Additional Legal on page(s) 2  
Assessor's Tax Parcel No's: 01-05-04-0-0-0808-00

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**CLAIM OF LIEN**

**Joe Zumstein, Jr.**  
Claimant,

vs.

**Shelley Moore**  
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: **Joe Zumstein, Jr.**  
**1801 N.E. Hayes Rd., Woodland, WA 98674**
2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE

Claim of Lien

PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE  
ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: January 10, 2005

3. NAME OF PERSON INDEBTED TO THE CLAIMANT:

*Shelley Moore*

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:

*NE quarter of the SW quarter, Section 4, Township 1 North, Range 5 East,  
Willamette Meridian, situated in the county of Skamania, State of Washington, together  
with all after acquired title of the grantor(s) therein: Lot 3 of Shelley Moore Short Plat*

5. NAME OF THE OWNER OR REPUTED OWNER: Shelley Moore

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: November 10,  
2005

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$31,660.87

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



Joe Zumstein, Jr.  
1801 N.E. Hayes Rd.  
Woodland, WA 98674  
(360) 749-0791  
(360) 225-7505

STATE OF WASHINGTON )

COUNTY OF SKAMANIA )

**Joe Zumstein, Jr.** 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 (or affirmed) before me on 1/27, 2006 by **Joe Zumstein, Jr.**

Dated: 1/27/06

Denise A. Ferner

(Signature)

NOTARY PUBLIC

DENISE A. FERNER

Print Name of Notary

My appointment expires: 10-29-2007

