

Return Address:

Pacific Rock Products, LLC

8705 N.E. 117th Avenue

Vancouver, WA 98662

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) <u>Andrey Dumitrash</u>	(2) _____	Add'l. on pg. _____
Grantee(s) (Claimants): (1) <u>Pacific Rock Products</u>	(2) _____	Add'l. on pg. _____
Legal Description (abbreviated): <u>381 Panda Rd. Washougal</u>		Add'l. legal is on page _____
Assessor's Property Tax Parcel /Account # <u>02-05-30-00-13-01-00</u>		

Pacific Rock Products, LLC

Claimant
vs.

Uprite 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: Pacific Rock Products, LLC
TELEPHONE NUMBER: 360/254-7770 ADDRESS: 8705 N.E. 117th Avenue
Vancouver, WA 98662
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: 11-1-06
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Uprite 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): 381 Panda Rd.
Washougal, WA Section 30, T2N, R5E, W.M.
5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Andrey Dumitrash
TELEPHONE NUMBER: _____ ADDRESS: 11001 NE Morris St.
Portland, OR 97220
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: 11-3-06



7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$6130.82 **

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A
Pacific Rock Products, LLC

By: Sue McDonough
Claimant Sue McDonough, Credit Manager
Print or Type Name 8705 N.E. 117th Avenue
Address Vancouver, WA 98662
360/254-7770
Telephone Number

**
Materials.....\$ 5953.95
Interest.....\$ 143.87
Recording Fees.....\$ 33.00
Less all credits and offsets.....\$ _____
Total due claimant.....\$ 6130.82

*Together with interest on the principal amount of \$ 6130.82 at the rate of 18% from the date of recording.

STATE OF WASHINGTON

County of Clark } ss.

Sue McDonough, 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.

Sue McDonough

Date this 19th day of January, 20.07

NANCY C. ALLDRIN
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
JULY 1, 2007

Nancy C Aldrin
Print Name Nancy C Aldrin
Notary Public in and for the State of Washington
My appointment expires: 7-1-07

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.