AFN	1 #200	81	69658	Reco	orded	l 04/2:	1/0)8 a	at	11:57	AM	Dog	cType:	LIEN	Filed	by:	Minister
& G	laese	er	Survey	ging	Inc	Page:	1	of	2	Audi	tor	J.	Michae	el Gar	rvison	Skar	nania
Cou	ınty,	WA															

Return Address:	ser Surveying, Inc.							
2200 E. Evergre		_						
Vancouver, WA		*						
CLAIM O	F LIEN							
Reference #(If applicable): 07-071.5 Grantor(s)(Owner): (1) LC Construction (2) Add'l on pg Grantee(s)(Claimants)(1) Minister & Glaeser Surveying, Inc. (2) Add'l on pg Legal Description(abbreviated): Parcel No. 01050500070000 Lot 3 of Eagle Peak Short Plat according to the plat thereof recorded under auditors file no 2006162927, records of Skamania county, WA Located in the South half of Section 5, Township 1 North, Range 5 East, Willamette Meridian, Skamania, Washington Assessor's Property Tax Parcel/Account # Acount #2006162927								
Minister & Glaese								
LC Construction 2	Claimant vs and Remodelers							
	person indebted to Claimant							
		- 46						
Notice is hereby g	iven that the person named below claims	a lien pursuant to chapter 60	04 RCW. In support of this					
	information is submitted:	a new paradam to diapter of	o rice (t. in support or and					
	7 7							
E.	NAME OF LIEN CLAIMANT: Minister & C TELEPHONE NUMBER: (360) 694-3313 A	Glaeser Surveying, Inc.	conver WA 98661					
. 1	ALLEL HOME NOMBER (500) 057-3513	duicss. 2200 E. Evergiech, Van	COUVEY, W.A. 78001					
2.	DATE ON WHICH THE CLAIMANT BEG SERVICES, SUPPLY MATERIAL OR EQU	AN TO PERFORM LABOR, P.	ROVIDE PROFESSIONAL					
	CONTRIBUTIONS BECAME DUE:		WHICH EMPLOTEE BENEFIT					
3.	NAME OF PERSON INDEBTED TO THE	CLAIMANT: LC Construction	<u>Remodelers</u>					
		_						
4 .	DESCRIPTION OF THE PROPERTY AGA description or other information that will rea Lot 3 of Eagle Peak Short Plat acc 2006162927, records of Skamania county, W Range 5 East, Willamette Meridian, Skaman	sonably describe the property):_ cording to the plat thereof record A. Located in the South half of	Parcel No. 01050500070000 led under auditors file no					
5.	NAME OF THE OWNER (S) OR REPUTEI Unkown TELEPHONE NUMBER:	ADDRESS:	Owner (2)					
		TELEPHONE NUMBER:	ADDRESS:					
6.	THE LAST DATE ON WHICH LABOR W. FURNISHED; CONTRIBUTIONS TO AN I EQUIPMENT WAS FURNISHED:	EMPLOYEE BENEFIT PLAN						
7.	PRINCIPAL AMOUNT FOR WHICH THE	LIEN IS CLAIMED IS:	\$700.00					

AFN #2008169658 Page: 2 of 2

OF THIS CLAIM SO STATE HERE:
MUNISTER TELAEBER SIVEVING Claimant Signature Print or Type Name 2700 E. EVERGREN BLVD, Address COUVER, VA 9866 1
360-694 -33/3
Telephone Number
being sworn, says: I am the claimant (or attorney of the claimant,
is of an employee benefit plan) above named; I have read or heard the foregoing the same to be true and correct and that the claim of lien is not frivolous and is we under penalty of perjury.
17 day of Afric 2008
Print Name KEVIN L BETHSE Notary Public in and for the State of Wishinkton My appointment expires: 11-15-60

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.