AFN	#20081	.69660	Recor	cded	04/21	./08	at	11:57	AM	Dog	:Type	LIEN	Filed	by:	Minister
& G]	Laeser	Survey	ying I	inc I	Page:	1 0	f 2	Audi	tor	J.	Michae	el Gar	rvison	Skar	nania
Cour	ity, WA	7													

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Return Address:	
	ser Surveying, Inc.
2200 E. Evergre	
Vancouver, WA	98661
CT 1 Th C O T	
CLAIM O	(LIEN ·
Reference #(If appl	icable): 07-071.2
Grantor(s)(Owner):	(1) LC Construction (2) Add'l on pg
Grantee(s)(Claiman	
Legal Description(a	abbreviated): Parcel No. 01050500110100 Lot 3 of Crest View Short Plat according to the plat thereof itors file no 2006162894, records of Skarnania county, WA. Located in the South half of Section 5, Township 1
	t, Willamette Meridian, Skamania, Washington
Assessor's Property	/ Tax Parcel/Account # Acount #2006162894
L.	
Minister & Glaese	r Surveying, Inc.
	· vs
LC Construction a	
	f person indebted to Claimant
. (41,120 0.1	
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:
- 1	
1.	NAME OF LIEN CLAIMANT: Minister & Glaeser Surveying, Inc.
	TELEPHONE NUMBER: (360) 694-3313 Address: 2200 E. Evergreen, Vancouver, WA 98661
2,	DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL
Ζ.	SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT
	CONTRIBUTIONS BECAME DUE: July 20, 2007
3.	NAME OF PERSON INDEBTED TO THE CLAIMANT: LC Construction Remodelers
4.	DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED(street address, legal
	description or other information that will reasonably describe the property Parcel No. 01050500110100
	Lot 3 of Crest View Short Plat according to the plat thereof recorded under auditors file no
	2006162894, records of Skamania county, WA. Located in the South half of Section 5, Township 1 North, Range 5 East, Willamette Meridian, Skamania, Washington
	Range 3 Cast, Windmone McAndian, Skaniama, Washington
5.	NAME OF THE OWNER (S) OR REPUTED OWNER (S)(If not known state "unknown"): Owner (1)
	Unkown TELEPHONE NUMBER:ADDRESS: Owner (2)
	TELEPHONE NUMBER: ADDRESS:
6.	THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICES WERE
٧.	FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL, OR
	EQUIPMENT WAS FURNISHED: 2.20.2008
7.	PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$770.00

AFN #2008169660 Page: 2 of 2

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE:	
MINISTER-GLAESER SON Claimant Chambel Johns Signature Signature Print or Type Name Address	TO BUD,
360-694-333	1000 1
Telephone Number	
STATE OF WASHINGTON	
SS.	
County of CLARK	
Ed muno DENNY JC , 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 rea claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lie made with reasonable cause, and is not clearly excessive under penalty of perjury.	d or heard the foregoing in is not frivolous and is
Signed and sworm to before me on this 17 day of April 2008	
Ki J PE	<u> </u>
KEVIN L. BETHJE Print Name Kevin L	BETHIE
NOTARY PUBLIC 1	Medination
I GIVIE OF MUCHINA.	
COMMISSION EXPIRES NOVEMBER 15, 2010 My appointment expires: 11-15-10	

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.