AF.	N #2	20081	.69661	Reco	rded	04/21	L/()8 a	at	11:57	AM	Dog	cType:	LIEN	Filed	by:	Minister
&	Glae	eser	Survey	/ing	Inc	Page:	1	of	2	Audit	tor	J.	Michae	el Ga	rvison	Skar	mania
Co	unts	Z, WZ	7														

Return Address:		
Minister & Glaes	ser Surveying, Inc.	
2200 E. Evergree	en Blvd.	. /
Vancouver, WA	98661	7 (/)
CLAIM OF	LIEN	7.0
Legal Description(a recorded under audi North, Range 5 East Assessor's Property	(1) LC Construction (2) ts)(1) Minister & Glaeser Surveying, Inc. (2) bbreviated): Parcel No. 01050500070000 Lot 2 of Eagle tors file no 2006162927, records of Skamania county, WA. L Willamette Meridian, Skamania, Washington Tax Parcel/Account # Acount #2006162927	Add'l on pg Add'l on pg Peak Short Plat according to the plat thereof ocated in the South half of Section 5, Township 1
Minister & Glaeser		
LC Construction a	Claimant vs nd Remodelers person indebted to Claimant	
		to short w 60 04 BCW. Is growned to this
	ven that the person named below claims a lien pursuan information is submitted:	t to chapter out of RCW. In support of this
L	NAME OF LIEN CLAIMANT: Minister & Glaeser Surveyi TELEPHONE NUMBER: (360) 694-3313 Address: 2200 E.	ng, Inc. Evergreen, Vancouver, WA 98661
2.	DATE ON WHICH THE CLAIMANT BEGAN TO PERFO SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR CONTRIBUTIONS BECAME DUE: July 20, 2007	
3.	NAME OF PERSON INDEBTED TO THE CLAIMANT: I	.C Construction Remodelers
4.	DESCRIPTION OF THE PROPERTY AGAINST WHICH description or other information that will reasonably describ Lot 2 of Eagle Peak Short Plat according to the p 2006162927, records of Skamania county, WA. Located in Range 5 East, Willamette Meridian, Skamania, Washington	e the property): <u>Parcel No. 01050500070000</u> lat thereof recorded under auditors file no the South half of Section 5, Township 1 North.
5.	NAME OF THE OWNER (S) OR REPUTED OWNER (S)(Unkown TELEPHONE NUMBER:ADDRES	If not known state "unknown"): Owner (1) SS: Owner (2) NUMBER: ADDRESS:
6.	THE LAST DATE ON WHICH LABOR WAS PERFORMI FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BI EQUIPMENT WAS FURNISHED: 2.20	ENEFIT PLAN WERE DUE; OR MATERIAL, OR
7.	PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIM	MED IS:\$1900.00

AFN #2008169661 Page: 2 of 2

8.	IF THE CLAIMANT IS THE ASSIGNEE OF THIS C	CLAIM SO STATE HERE:
	Claiman Signatur Print or T Address	MUND JOHNY 9. MUND DENNY 9. MUND DENNY TO. MUND DENNY TO.
County of	ss.	e Number
or adminis	strator, representative, or agent of the trustees of an empt d and know the contents thereof, and believe the same to reasonable cause, and is not clearly excessive under pe	being sworn, says: I am the claimant (or attorney of the claimant, loyee benefit plan) above named; I have read or heard the foregoing be true and correct and that the claim of lien is not frivolous and is nalty of perjury.
	KEVIN L. BETHJE NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES NOVEMBER 15, 2010	Print Name Kell L- BETHJE Notary Public in and for the State of WASHINGTON 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.