

Return Address:

Janet Gustafson  
531 Dobbins Rd  
Washougal, WA 98671

<i>Document Title(s) or transactions contained herein:</i> A & B Rock Distributors, LLC - Harvey Erickson Lease extension confirmation
<i>GRANTOR(S) (Last name, first name, middle initial)</i> ERICKSON, Harvey <input type="checkbox"/> Additional names on page _____ of document.
<i>GRANTEE(S) (Last name, first name, middle initial)</i> A & B Rock Distributors, LLC <input type="checkbox"/> Additional names on page _____ of document.
<i>LEGAL DESCRIPTION (Abbreviated: i.e., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)</i> E2 NW4 Sect 27 T2N R5E W4 <input type="checkbox"/> Complete legal on page _____ of document.
<i>REFERENCE NUMBER(S) of Documents assigned or released:</i> 2006160304 <input type="checkbox"/> Additional numbers on page _____ of document.
<i>ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER</i> 02 05-27-0-0-1100-00 <input type="checkbox"/> Property Tax Parcel ID is not yet assigned <input type="checkbox"/> Additional parcel numbers on page _____ of document.
The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.



SMITH FREED & EBERHARD P.C.

ATTORNEYS AT LAW

Anne Cohen • Partner  
Admitted in Oregon, Washington & Utah  
Direct Dial: 503.471.2615  
Email: acohen@smithfreed.com

111 SW 5<sup>th</sup> Avenue, Suite 4300  
Portland, OR 97204  
P: 503.227.2424 F: 503.227.2535

July 31, 2015

Daniel Gustafson  
531 Dobbins Road  
Washougal, WA 98671

Re: A&B Rock Distributors LLC / Harvey Erickson

Dear Mr. Gustafson:

Pursuant to your request, enclosed please find a copy of correspondence dated February 20, 2012 to Harvey Erickson, with a copy of the registered mail receipt attached.

If you need anything additional, please let us know.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Anne Cohen', is written over the typed name.

Anne Cohen

/sr  
Enclosures



**SMITH FREED & EBERHARD P.C.**

ATTORNEYS AT LAW

**Anne Cohen • Partner**  
Admitted in Oregon and Washington  
Direct Dial: 503.471.2615  
Email: acohen@smithfreed.com

111 SW 5<sup>th</sup> Avenue, Suite 4300  
Portland, OR 97204  
P: 503.227.2424 F: 503.227.2535

February 20, 2012

4408ml

**VIA REGISTERED MAIL,  
RETURN RECEIPT REQUESTED**

Harvey Erickson  
c/o Paula T. Olson  
Law Office of Paula T. Olson  
4534 S Pine St  
Tacoma, WA 98409-6527

Re: **A&B Rock Distributors LLC – Harvey Erickson  
LEASE EXTENSION**

Dear Mr. Erickson:

Pursuant to Section II of the Rock Mining Lease entered into between you and A&B Rock Distributors LLC on March 31, 2002, this letter provides formal notice that A&B Rock Distributors, LLC hereby extends the term of the Lease for an additional 10 years, beginning on March 31, 2012.

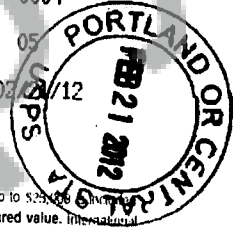
Very truly yours,

A handwritten signature in black ink, appearing to read 'Anne Cohen', is written over the typed name 'Anne Cohen'.

AC/cjf

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)                  Nikki Douncek</p> <p>C. Date of Delivery                  2-23-12</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                  If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Harvey Erickson                  c/o Paula T. Olson                  Law Office of Paula Olson                  4534 S. Pine St.                  Tacoma, WA 98409-6527</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered    <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee)    <input type="checkbox"/> Yes</p>
<p>2. Article Number    RE 734 051 045 US                  (Transfer from service label)</p>	
<p>PS Form 3811, February 2004    Domestic Return Receipt    102595-02-M-1540</p>	

Registered No. RE734051045US		Date Stamp	
	Reg Fee	\$10.95	
To Be Completed By Post Office	Handling Charge	\$0.00	Return Receipt \$2.35
	Postage	\$0.65	Restricted Delivery \$0.00
	Received by		
	Customer Must Declare Full Value \$0.00		Domestic insurance up to \$2,500 based upon the declared value. International indemnity is limited. (See Reverse)



	97240		
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM	Smith Fred 1115 N 5th Ave #4300 Portland OR 97204	
	TO	TACOMA, WA 98409 Harvey Erickson c/o Paula T Olson 4534 S. Pine St. Tacoma, WA 98409	

PS Form 3806, Receipt for Registered Mail Copy 1 - Customer  
 May 2007 (7530-02-000-9051)  
 For domestic delivery information, visit our website at www.usps.com®