RETURN TO:	
NEIL KNUTSON CO.	
1421 LAKEWOOD DR.	200406210087
CAMANO ISLAND, WA 98282	Skagit County Auditor
	6/21/2004 Page 1 of 2 9:50AW
NEIL KNUTSON CO. Claimant VS.	
JOHN R. COX & ASSOCIATES Name of person indebted to claiman	t: CLAIM OF LIEN
Notice is hereby given that the person to chapter 60.04 RCW. In support of submitted.	on named below claims a lien pursuant this lien, the following information is
Name of Lien NEIL KNUTSON CO.	Name of Owner ALEXANDER A. MCLAREN Or
1. Claimant: 1421 LAKEWOOD DR.	5. Reputed Owner: P. O. BOX 911
Address: CAMANO ISLAND, WA 98282	Address: TACOMA, WA 98401
Telephone #: (360) 387-0180	Certified #: 7001 2510 0003 8003 1810
2. Date of which the claimant began to particles, supply or equipment or the contributions became due: MAY 14, 2	perform labor, provide professional date of which employee benefit 2004
3. Name of person indebted to the claim	nant: JOHN R. COX & ASSOCIATES
4. Description of the property against w	hich a lien is claimed:
NORTH HALF VACATED ALLEY AND LO VACATED ALLEY AND LOTS 11 THRU 13 ANACORTES, ACCORDING TO THE REC	3, BLOCK 16, BOWMAN'S C.S.H.W.F. PLAT TO

ANACORTES, WA 98221

WASHINGTON.

TAX PARCEL #P56850

COMMONLY KNOWN AS: 101 5TH ST.

furnished; co	e on which labor ontributions to a t was furnished:	n employee b	ed; professional s enefit plan were d	ervices were ue; or material
MAY 18	, 2004			
7. Principal amo FEE = \$2,052	ount for which th	ne lien is clain	ned is: <u>\$1,942.20</u>	+ \$110.00 LIEN
8. If the claimar	nt is the assigned	e of this claim	so state here:	<u>NONE</u>
			EP. MEX	
State of Washir of	ngton, County		PVO NO	
KING	, ss.			
CLAIMANT) be administrator, recently plan) at contection the contection of lies to the contection of lies to the claim of lies to the contection of lies to the content of lies to the lies to the content of lies to the content of lies to the content of lies to the lies to the content of lies to the l	ing sworn, says: epresentative, or pove named; I h nts thereof and	: I am the cla r <u>agent of the</u> ave read or I I believe the s s and is mad	mant (or attorney <u>claimant</u> or truste leard the foregoin lame to be true a	CORP, AGENT FOR of the claimant or ees of an employee and correct and that cause, and is not
		JÓY FOR 1142-		DENT, AGENT D. (360) 387-0180
Subscribed and	d sworn to before	-	IANO ISLANĎ, WA Hday of <u>JUN</u>	
		- 2	erlanet	www.
Notary Public i	n and for the Sta	nte of Washing	ton, residing at: _	SEATTLE
		My Cor	nmission Expires	OCTOBER 16, 300
				##."

2 9:50AM