

**PLEASE RECORD AND RETURN TO:**

**LienData USA, Inc. Agents For**

**P.O. Box 1120**

**Bothell, WA 98041-1120**



200506280141

Skagit County Auditor

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**CLAIM OF LIEN**

**CB WHOLESALE, INC.,  
CLAIMANT,  
VS.  
HORIZON DRYWALL,  
Person or Persons  
Indebted to Claimant,**

**NOTICE IS HEREBY GIVEN** that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

- Owner:**
- Devries General Contracting**  
1. **NAME OF LIEN CLAIMANT:** **CB Wholesale Inc.**  
**ADDRESS:** **801 West Orchard Ste 2**  
**Bellingham, WA 98225**  
**TELEPHONE NUMBER:** **(360) 738-3992**
  2. **DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE:** **April 7, 2005**
  3. **NAME OF PERSON INDEBTED TO CLAIMANT:**  
**Horizon Drywall Inc**  
**P.O. Box 1266**  
**Burlington, WA 98233**
  4. **DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED: BINGHAM AC, BLOCK 4, LOT 14, TOGETHER WITH THE NORTH 20 FEET OF VACATED ROAD ADJACENT TO SAID PROPERTY PER ORDER OF VACATED ROAD ADJUSTED TO SAID PROPERTY PER ORDER OF VACATION # 18475 UNDER AF#200111150009.**

**Commonly Known As:** **Parcel #P62209**  
**23090 Buchanan Street**  
**Mount Vernon, Skagit County, Washington**

5. NAME OF THE OWNER OR REPUTED OWNER:  
**Devries General Contracting Inc**  
**P.O. Box 2189**  
**Mount Vernon, WA 98273**
  
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED;  
 PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO  
 AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL, OR  
 EQUIPMENT WAS FURNISHED: **April 7, 2005**
  
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN  
 IS CLAIMED IS: **\$3,317.24** PLUS INTEREST  
 PLUS LIEN FEES  
 PLUS COURT COST & ATTORNEY FEES
  
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE  
 HERE: **Not Applicable**

DATED this 27th day of June, 2005.

LienData USA, Inc.  
 AGENT FOR CLAIMANT  
 P.O. Box 1120  
 Bothell, WA 98041-1120

CB Wholesale, Inc.  
 CLAIMANT  
 801 West Orchard, Ste 2  
 Bellingham, WA 98225  
 (360) 738-3992

STATE OF WASHINGTON )  
 ) ss.  
 COUNTY OF KING )

Nick Larson, 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 read or heard the foregoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

*Nick Larson*  
 Nick Larson

SUBSCRIBED AND SWORN to before me this 27th day of January, 2005.

*Judi M. Elsbree*  
 Judi M Elsbree  
 NOTARY PUBLIC in and for the  
 State of Washington residing at Bothell  
 My Commission expires: 08/18/07

