



200801310164
Skagit County Auditor

1/31/2008 Page 1 of 2 3:49PM

AFTER RECORDING RETURN TO:

LIEN RESEARCH CORP.
P. O. BOX 148
MARYSVILLE, WA 98270

CLAIM OF LIEN

ARCHITECTURAL CABINETS, INC.

Claimant.

VS

JOHN MILCHENKO

(Name of person indebted to claimant)

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

1. NAME OF LIEN CLAIMANT: ARCHITECTURAL CABINETS, INC.
TELEPHONE NUMBER: (360) 435-4529
ADDRESS: 7423 204TH ST NE, ARLINGTON, WA. 98223

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: MAY 12, 2007

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: JOHN MILCHENKO, 2855 OLD 99 NORTH RD, BURLINGTON, WA. 98233

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:
ADDRESS: 2855 OLD 99 NORTH RD, BURLINGTON, WASHINGTON
LEGAL DESCRIPTION: LOT 1 OF SKAGIT COUNTY SHORT PLAT PL05-0749, AS RECORDED UNDER AUDITOR FILE NO. 200701100120, BEING A PORTION OF THE SOUTHWEST QUARTER OF SECTION 17, TOWNSHIP 36 NORTH, RANGE 4 EAST, RECORDS OF SKAGIT COUNTY, STATE OF WASHINGTON.
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P125873

5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"):
WILLIAM E & JERELYN J KRAMER, 1442 SUNSET AVE, FERNDALE, WA. 98248
JOHN MILCHENKO 2855 OLD 99 NORTH RD BURLINGTON WA 98233

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: NOVEMBER 2, 2007

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$18,868.20 PLUS APPLICABLE LIEN FEES &/OR ATTORNEY'S FEES, &/OR INTEREST.

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A.

For, ARCHITECTURAL CABINETS, INC., Claimant
7423 204TH ST NE
ARLINGTON, WA. 98223
(360) 435-4529
(Phone Number, Address, City/State of Claimant)

STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

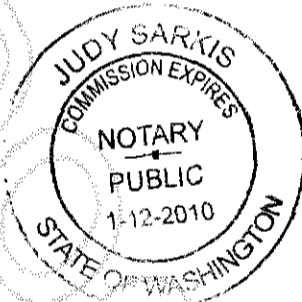
DAVID ELLIOTT, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

David Elliott

On this day personally appeared before me, DAVID ELLIOTT, to me known to be the individual, described above, and who further, under oath, stated that he/she had read the claim set forth above, and based upon information provided knew the contents thereof, and believed the same to be true and correct, and that the claim was made with reasonable cause and was not frivolous, and further acknowledged to me that he/she signed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 31 day of January, 2008

Judy Sarkis
PRINTED NAME: JUDY SARKIS
NOTARY PUBLIC
in and for the State of Washington.
Residing in: STANWOOD
My commission expires: 1/12/2010



Order #08-012265, dated: 1/29/2008



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