

RETURN ADDRESS:
Andgar Corporation
PO Box 2708 / 6920 Salashan Pkwy, A-102
Ferndale, WA 98248



200811210052
Skagit County Auditor

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CLAIM OF LIEN

Reference Number: _____
Grantor(s) (Owner): Rhodes J Phillip
Grantee(s) (Claimants): Andgar Corporation
Legal Description: BOWMAN'S C.S.H.W.F. PLAT TO ANACORTES, BLOCK 16
(abbreviated) ACRES .024, LOT 1
Assessor's Property Tax
Parcel /Account No.: P56850

Andgar Corporation,

Claimant,

vs.

Rhodes J Phillip

Name of person 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:

1. **NAME OF LIEN CLAIMANT:** Andgar Corporation
TELEPHONE NUMBER: (360) 366-9900
ADDRESS: P.O Box 2708 / 6920 Salashan Pkwy, A-102
Ferndale, WA 98248

- 2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT, OR THE DATE ON WHICH THE EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: June 19, 2008
- 3. NAME OF PERSON INDEBTED TO THE CLAIMANT CC&R Development LLC,
3917 Aaron Court, Bellingham, WA 98226
- 4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 101 5th Street, Anacortes, WA, the legal description of which is believed to be BOWMAN'S C.S.H.W.F. PLAT TO ANACORTES, BLOCK 16, ACRES 0.24, LOT 1
- 5. NAME OF THE OWNER OR REPUTED OWNER (if not known, state unknown): Rhodes J Phillip, PO Box 1721 Anacortes WA 98221
- 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: October 30, 2008
- 7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$9,496.96 plus other amounts to become due
- 8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM, SO STATE HERE: _____

Claimant: *Gary J. VanLoe*
 Print or Type Name: Andgar Corporation
 Address: 6920 Salashan Pkwy A-102, Ferndale, WA
 Telephone: (360) 366-9900

STATE OF WASHINGTON)
) ss
 COUNTY OF Whatcom)

Gary J. VanLoe, being first duly sworn, on oath deposes and states: 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 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 clearly not excessive under penalty of perjury.

SUBSCRIBED AND SWORN TO before me this 20th day of November, 2008

Vicki L. Pine
 NOTARY PUBLIC in and for the
 State of washington
 residing at Bellingham, WA
 My appointment expires 4-22-09

