



200601040100
Skagit County Auditor

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Return Address:

KELLY A HARTZ
22209 SR 534
MT. VERMONT, WA 98274

CLAIM OF LIEN

Indexing information required by the Washington State Auditor's/Recorder's Office. (RCW 36.18 and RCW 65.04) 1/97 (please print last name first)
Reference # (if applicable): _____
Grantor(s) (Owner): (1) Dwayne Mathieu SR. Add'l. on pg. _____
Grantee(s) (Claimants): (1) Kelly A Hartz (2) _____ Add'l. on pg. _____
Legal Description (abbreviated): 25-36-4 Add'l. legal is on page _____
Assessor's Property Tax Parcel /Account # 300425-1-012-0201

KELLY A. HARTZ
Claimant
DWAYNE A. MATHIEU, SR. vs.
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:

- NAME OF LIEN CLAIMANT: KELLY A HARTZ
TELEPHONE NUMBER: 360 495-1800 ADDRESS: 22209 SR 534
MT. VERMONT, WA 98274
- 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: OCTOBER 30th, 2004
- NAME OF PERSON INDEBTED TO THE CLAIMANT: DWAYNE A. MATHIEU, JR.
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property):
4239 BLANK RD. SEASO-WOODLEY, WA 98284
* LOT 3 S1P H93-63 REC AF R 931229 0015 BEING PTN
NW 1/4 NE 1/4 SEC 25
- NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): DWAYNE A. MATHIEU, JR.
TELEPHONE NUMBER: UNKNOWN ADDRESS: UNKNOWN
- 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: 12/31/05



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MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.



NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.



My appointment expires: 7-4-2009
Notary Public in and for the State of WASHINGTON
Print Name: Deanna Deatley Archer

Signed and sworn to before me on this 14th day of JANUARY 2006

under penalty of perjury, 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
Kelly A. Hartz
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

STATE OF WASHINGTON
County of SKAGIT
SS. Kelly A. Hartz

Claimant: Kelly A. Hartz
Print or Type Name: Kelly A. Hartz
Address: 2209 SE 534 MT. VERNON, WA 98271
Telephone Number: 360-945-3800

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$ 51,411.80
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: YES