



200911050058
Skagit County Auditor

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After recording, return to (Name, Address, Zip):

CLAIM OF LIEN

Grantor (Name of person indebted to Claimant): Deborah K Sullivan
Grantee (Claimant): Wesley R Wedner
Abbreviated Legal Description: LT 3 SP 94-216
Assessor's Property Tax Parcel or Account No: R10-7274
Reference No(s) of Related Documents:

Wesley R Wedner

Claimant,

vs.

Deborah K Sullivan
Keith Sullivan

Name of person indebted to Claimant..

Notice is hereby given that the person named below claims a lien pursuant to Chapter 64.04 RCW. In support of this lien the following information is submitted:

1. Name of Lien Claimant: Wesley R Wedner
Telephone Number: (360) 661-2088 Address: 543 Linda Ave NE
Keizer, OR 97303
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: 5/1/2007
3. Name of person indebted to the Claimant: Deborah Sullivan
4. Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): 7818 Coal Creek Rd.
Sedro Woolley, WA 98284
5. Name of the owner or reputed owner (If not known state "unknown"):
6. The last date on which labor was performed; professional services were furnished; or contributions to an employee benefit plan were due; or material or equipment was furnished: 6/20/2009

(OVER)



Form No. 90 - Claim of Lien

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Skagit County Auditor



My appointment expires 11/18/2011
Notary Public for Washington
Marlene J Wegner
SIGNED AND SWORN TO before me on November 5, 2009
Wesley Wodner

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.

Wesley Wodner

STATE OF WASHINGTON,
County of Skagit
ss.

CLAIMANT
Wesley Wodner DEA Sound Mobile Imaging
CLAIMANT'S NAME (TYPED OR PRINTED)
543 Linda Ave N.E.
STREET ADDRESS
Keizer, OR 97303 360 661
CITY STATE ZIP PHONE
2088

7. Principal amount for which the lien is claimed is: \$29,984.00
8. If the Claimant is the assignee of this claim so state here: