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211:24AM

P. Jim and Indiana Chara	
Recording requested by Williams Sharp When recorded, mail to:	
and the second of the second o	Consolina annual for the by Beautiful Office
Name: Whyne Sharp Const, In	
Address: 1382 Bonne M	Document prepared by:
city: Chinanols, WA 982	
State/Zip: WA 98280	Address 1382 Bonnie In
	City/State/Zip Comanifsland UA
Claim of Lien	1988
Ciaiiii vi Lieii	
State of Washington	And the state of t
ال المالية ا	
County of Sking it	
I, Wayne Sharp	, being duly sworn, state the following:
In accordance with an agreement to provide la	bor and/or material, I did furnish the following labor and/or materials:
labor for setup ariv	eway, Sidewark, front porch and
finish first section of	- arivenay
on the following described real property locate	ed in Skaaut County,
a lalash action	commonly known as: Parcel # P/24081 1 4 6 Fee demont Physics 18 NVS
State of VVGSVIII 191611	, commonly known as: 4883 000 1720000
and legally described as: No 5 + 6, 60	cording to The Plat Thereof recorded
Jan-10, 2006 exact (11.01	under auditors file # 200601100170. 1 Washington.
which property is owned by Jonath	
Sandimas, CA 91773	, of a total value of \$, of which there
remains unpaid \$ 1478.50	, and I further state that I furnished the first of the items on the date of
Sentember 8, 2009 and the	e last of the items on the date of September 8, 2009
Comment of Contract	
	00)- 00-0
I hereby, under the laws of the State of	
property in the amount of money, stated above	e, which remains unpaid to me.

gnature of Person Claiming Lien		
Wayne Sharp		•
ame of Person Claiming Lien		
ddress of person claiming lien: 1382	Bonnie Lane 98282 no Island, WA 98282	
	Wayne Shurp	
nd, under oath, stated that he/she is the personce.	on described in the above document and that	ne/sne signed the above
ocument in my presence,	Se Meson of	
MALON DAG	Z O NOTARY	
_ M) Horal	PUBLIC PUBLIC	
lotary Signature		
Notary Public, on and for the County of <u>Sno hmist</u>	State of Washington	Maria Programme
		-
My commission expires: $\frac{25/23/301}{25/23/301}$	<u>o</u> 564.	l
ERTIFICATE OF MAILING		
		7.1
· ·	, certify that on this date,	, I have
named a copy of this Claim of Lien by USPS	certified mail, return receipt requested, in a	ccordance with the law, to:
lame:		V.
**		
Address:		
Date:		
CD VALUE OF CONTRACT		- ~< > !
Signature of Person Mailing Claim of Lien		
Name of Person Mailing Claim of Lien		



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