



201008170047

Skagit County Auditor

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

8/17/2010 Page

1 of

3 3:14PM

Sally Straathof
1507 E. Hazel Ave.
Burlington, WA 98233

CLAIM OF LIEN

Grantor (Name of person indebted to Claimant): BRIAN E. STRAATHOF
Grantee (Claimant): SALLY L. STRAATHOF
Abbreviated Legal Description: 532 TOWNSHIP SE 0ND WOODLEY, WA. 98254
Assessor's Property Tax Parcel or Account No: P11567, 4171-001-025-0300
Reference No(s) of Related Documents:

SALLY L. STRAATHOF

Claimant,

vs.

BRIAN E. STRAATHOF

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: SALLY L. STRAATHOF
Telephone Number: 360-755-9256 Address: 1507 E. HAZEL AVE.
Burlington, WA. 98233
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: October 2007
3. Name of person indebted to the Claimant: BRIAN E. STRAATHOF
4. Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): 532 TOWNSHIP, SE 0ND WOODLEY, WA. 98254
See Attached for legal 24-35-04
5. Name of the owner or reputed owner (If not known state "unknown"): BRIAN E. STRAATHOF
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: April 2010

(OVER)

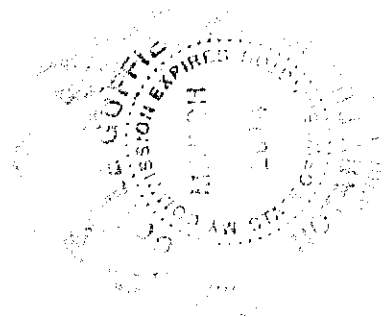
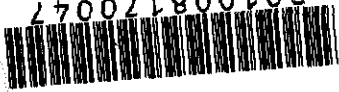


Form No. 90 - Claim of Lien

BE

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My appointment expires March 28, 2014
Notary Public for Washington

SIGNED AND SWORN TO before me on August 17, 2010

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.

Sally L. Straathof, being sworn, says: I am the
County of Skagit } ss.
STATE OF WASHINGTON.

CITY Burlington, WA. STATE WA. ZIP 98233 PHONE 360-955-9256
STREET ADDRESS 1507 E. HAZEL AVE.
CLAIMANT'S NAME (TYPED OR PRINTED) Sally L. Straathof

7. Principal amount for which the lien is claimed is: \$265,000.00
8. If the Claimant is the assignee of this claim so state here: Sally Straathof

Sally L. Straathof
CLAIMANT

Exhibit A

Lot 2, City of Sedro-Woolley Short Plat No. SW-06-96, approved June 24, 1997, and recorded June 27, 1997, in Volume 13 of Short Plats, page 16, under Auditor's File No. 9706270067, records of Skagit County, Washington; being a portion of Lot 25, "PLATE NO. 1, SEDRO HOME ACREAGE, SKAGIT CO., WASH., 1904", as per plat recorded in Volume 3 of Plats, page 39, records of Skagit County, Washington.

Situate in the City of Sedro-Woolley, County of Skagit, State of Washington.



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Skagit County Auditor

8/17/2010 Page 3 of 3 3:14PM



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Skagit County Auditor

6/4/2001 Page 2 of 3 8:46:21AM