

6/8/2012 Page

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2 8:45AM

Recording requested by:	Space above reserved for use by Recorder's Office
When recorded, mail to:	Document prepared by:
Name: Peter Mullen	Name Brian Patrick Basse
Address: (356 Rayvien Rd.	Address 3108 Wilson Ave.
City/State/Zip: M.f. Secretary Miles	Address 3108 Wilson Ave.  City/State/Zip Bellinsham, WA 78225
Claim of Lien	· · · · · · · · · · · · · · · · · · ·
State of Washinston	
State of Washington County of Skasid	
I, Rose Borse In accordance with an agreement to provide labor and/o materials:	, being duly sworn, state the following: or material, I did furnish the following labor and/or
materials.	
on the following described real property located in	terminal to the state of the st
Wadrington, commonly known as	
P 111081	
and legally described as: Let   SP 99-	021 35-3
which property is owned by Petes + Stacia V	Mullen, whose address is
13561 Bayview Road, Mt. Vesner	1 1014, 98273, of a total value
of \$, of which there remains unpaid	
furnished the first of the items on the date of	, and the last of the items on
	*NOVA LF136 Claim of Lien Pg.1 (08-09)

the date of March 10, 2017.	
the date of yviacon 10, 2017.	
I hereby, under the laws of the State of Washington, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.	
Signature of Person Claiming Lien  Name of Person Claiming Lien	_
Signature of Person Claiming Lien  Name of Person Claiming Lien	
Address of person Claiming lien: 3104 Wilson ave. Bellmshim, W. 1872	ـــــ
- 510 % WILSON -06. 154117154171, WA. 1822	<b>~</b>
On June 7, 2012, Brian Patrick Barge came before	
me personally and, under oath, stated that he/she is the person described in the above document and that he/she signed the above document in my presence.	
ANA DATE	
Alana Ingrito	
Notary Public, Hana Fizzu Fo In and for the County of Skagit State of Washing To	
My commission expires: 6-7-12 State of Washing to 10-18	
My commission expires. Washing in the second washing	
CERTIFICATE OF MAILING	
I, Brian Patrick Box, certify that on this date, June 7, 2012, I have mailed a	ì
copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with the law, to	:
Name: Noter Walles	
Address: 135(01 Bayuna Rd. M. Vanco, WA. 98273	
Date: June 7, 2012	
$(QQ)_{1}$ $Q$ $Q$	
Signature of Person Mailing Claim of Lien Name of Person Mailing Claim of Lien	• Parting and the second second
A STANKE A TO A STANK CHARLA STANK A S	
Skagit County Auditor	

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