



201207170086
Skagit County Auditor

7/17/2012 Page 1 of 2 3:22PM

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

Country Club Road Association
70 Robert Creighton, treasurer
16551 Country Club Dr.
Burlington, wa 98233

CLAIM OF LIEN

Grantor (Name of person indebted to Claimant): Tim Hansen & Shelly Hansen
Grantee (Claimant): Country Club Road Association
Abbreviated Legal Description: 12770 Country Club Place, Burlington wa 98823
Assessor's Property Tax Parcel or Account No: P64590, Xref 3889-000-005-0005
Reference No(s) of Related Documents:

Country Club Road Association

Claimant,

vs. Tim Hansen & Shelly Hansen

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: Country Club Road Association
Telephone Number: 360-899-5054 Address: 16551 Country Club Dr.
Burlington, wa 98233
- 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: Jan 1, 2011
- Name of person indebted to the Claimant: Tim Hansen & Shelly Hansen
- Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): 12770 Country Club Place, Burlington wa 98233, Parcel # P64590, Xref 3889-000-005-0005
- Name of the owner or reputed owner (If not known state "unknown"): Tim Hansen & Shelly Hansen
- 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: June 30, 2012

(OVER)



7. Principal amount for which the lien is claimed is: 326⁰⁰

8. If the Claimant is the assignee of this claim so state here: _____

Country Club Road Association
CLAIMANT
Country Club Road Association
CLAIMANT'S NAME (TYPED OR PRINTED)
16551 Country Club Dr.
STREET ADDRESS
Burlington, wa. 98233 (360) 899-5054
CITY STATE ZIP PHONE

or 360-757-6332
or 360-757-0489

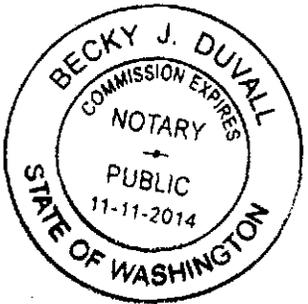
STATE OF WASHINGTON,
County of SKAGIT } ss.

Robert W. Creighton, 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 under penalty of perjury.

[Signature]

SIGNED AND SWORN TO before me on July 17, 2012

Becky J. Duvall
Notary Public for Washington
My appointment expires 11-11-2014



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Skagit County Auditor