



AFTER RECORDING RETURN TO:

NORTHWEST LIEN SERVICE, INC.  
24447 234<sup>TH</sup> WAY SE  
MAPLE VALLEY, WA. 98038

CLAIM OF LIEN

SERVPRO OF SKAGIT COUNTY  
Claimant.  
VS  
JACQUELYN LINDEMAN  
(Name of person indebted to claimant)

NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

1. Name of Claimant: SERVPRO OF SKAGIT COUNTY  
Telephone Number: (360) 873-8744  
Address: 114 LIND ST, STE. B, MOUNT VERNON, WA. 98273
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: APRIL 14, 2013
3. Name of person indebted to the Claimant: JACQUELYN LINDEMAN, 2725 E. FIR STREET, UNIT 51, MOUNT VERNON, WA. 98273
4. Description of the property against which a lien is claimed:  
Address: 4609 GUEMES VIEW, ANACORTES, WA.  
Legal Description: LOT 119, CLEARIDGE, DIVISION I, AS PER PLAT RECORDED IN VOLUME 12 OF PLATS, PAGES 76 THROUGH 79, RECORDS OF SKAGIT COUNTY, WASHINGTON.  
SKAGIT County Assessor's Tax Parcel No. P81776
5. Name of owner or reputed owner (if not known state "unknown"):  
LINDEMAN FAMILY TRUST & TIMOTHY J. & JACQUELYN M. LINDEMAN TRUSTEES, 2725 E. FIR ST, UNIT 51, MOUNT VERNON, WA. 98273
6. The last date on which labor was performed, professional services were furnished; contributions to an employee benefit plan were due on material, or equipment was furnished: APRIL 17, 2013
7. Principal amount for which the lien is claimed: \$7,354.55, plus applicable lien fees &/or attorney's fees, &/or interest.
8. If the Claimant is the assignee of this claim so state here: N/A.

Northwest Lien Service, Inc.

By: Brandi King  
It's Authorized Representative/Employee,  
As Authorized agent of SERVPRO OF SKAGIT COUNTY, Claimant  
114 LIND ST, STE. B,  
MOUNT VERNON, WA. 98273  
(360) 873-8744

STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

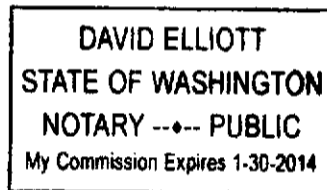
BRANDY KRUG, being sworn, says: I am an authorized representative/employee of the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe 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.

*Brandy Krug*

Subscribed and sworn to before me this 5 day of July, 2013

*David Elliott*

PRINTED NAME: DAVID ELLIOTT  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: EVERETT  
My commission expires: 1/30/2014



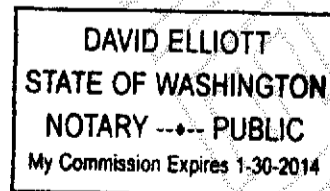
STATE OF WASHINGTON )  
 ) ss  
COUNTY OF SNOHOMISH )

On this 5 day of July, 2013, before me personally appeared BRANDY KRUG, to me known to be the (president, vice president, secretary, treasurer, or other authorized officer or agent, as the case may be) of Northwest Lien Service, Inc., a Washington corporation, that executed the within and foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said corporation, for the uses and purposes therein mentioned, and on oath stated that he/she was authorized to execute said instrument and that the seal affixed is the corporate seal of said corporation.

In Witness Whereof I have hereunto set my hand and affixed my official seal the day and year first above written.

*David Elliott*

PRINTED NAME: DAVID ELLIOTT  
NOTARY PUBLIC  
in and for the State of Washington.  
Residing in: EVERETT  
My commission expires: 1/30/2014



Order #13-070099-N, dated: 7/2/2013

