

201508270078

Skagit County Auditor

8/27/2015 Page

1 of

\$73.00

211:40AM

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

Willabelle Estates Homeowners AssociationAttn Jim Thompson22275 Willabelle PlaceMount Vernon, Washington 98274**CLAIM OF LIEN**Grantor (Name of person indebted to Claimant): Mildred LeslieGrantee (Claimant): Willabelle Estates Homeowners AssociationAbbreviated Legal Description: Lot 1, Willabelle EstatesAssessor's Property Tax Parcel or Account No: P123529

Reference No(s) of Related Documents:

Willabelle Estates Homeowners Association

Claimant,

vs.

Mildred Leslie

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: Willabelle Estates Homeowners Association
Telephone Number: 425-308-5201 Address: 22275 Willabelle Place, Mount Vernon, WA 98274
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:
3. Name of person indebted to the Claimant: Mildred Leslie
4. Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): Lot 1, Willabelle Estates, Mount Vernon, WA 98274
5. Name of the owner or reputed owner (If not known state "unknown"): Mildred Leslie
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: Nonpayment of HOA assessments from 2010 through 2014

(OVER)



Form No. 90 - Claim of Lien

BEBE

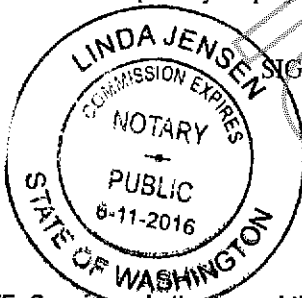
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NO PART OF ANY WASHINGTON LEGAL BLANK FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.

7. Principal amount for which the lien is claimed is: \$2,840.00, filing fees, future delinquent HOA dues, plus accrued interest
8. If the Claimant is the assignee of this claim so state here: Larry Fladebo, President

Willabelle Estates Homeowners Assn 22275 Willabelle Place
CLAIMANT STREET ADDRESS
Willabelle Estates Homeowners Assn Mount Vernon WA 98274 425-308-5201
CLAIMANT'S NAME (TYPED OR PRINTED) CITY STATE ZIP PHONE
STATE OF WASHINGTON, County of SKAGIT) ss.

Larry Fladebo, 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.



SIGNED AND SWORN TO before me on 8-27-2015

Linda Jensen
Notary Public for Washington
My appointment expires 6-11-2016

NOTE: Consider whether one of the following additional notarial certificates should be completed. See *Williams v. Athletic Field, Inc.*, 155 Wn.App. 434, 228 P.3d 1297 (2010).

If the individual signing the Claim of Lien is making the Claim of Lien on his or her own behalf:

STATE OF WASHINGTON, County of _____) ss.

I certify that I know or have satisfactory evidence that _____ is/are the individual(s) who appeared before me, and who acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.
DATED _____

Notary Public for Washington
My appointment expires _____

If the individual signing the Claim of Lien is making the Claim of Lien as an agent of another individual or as an agent on behalf of a business entity:

STATE OF WASHINGTON, County of _____) ss.

I certify that I know or have satisfactory evidence that _____ is the individual who appeared before me, and who acknowledged that he/she signed this instrument, on oath stated that he/she was authorized to execute the instrument and acknowledged it as the _____ of _____ to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.
DATED _____

Notary Public for Washington
My appointment expires _____