



201604260002

Stagit County Auditor

\$74.00

4/26/2016 Page

1 of

2 9:05AM

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

PAMELA BURNS (SECRETARY)  
 WILDLIFE ACRES COMM. ASSO.  
 4792 WILDLIFE ACRES LN.  
 SEDRO WOOLLEY, WA 98284

## CLAIM OF LIEN

US BANK NAT'L

Grantor (Name of person indebted to Claimant): C-BASS MORTGAGE - ASSOC. TRUSTEE

Grantee (Claimant): WILDLIFE ACRES COMMUNITY ASSOC (HOA)

Abbreviated Legal Description: ~~ACRES~~ 28-36-04 SESE

Assessor's Property Tax Parcel or Account No: P50234

Reference No(s) of Related Documents: ~~115~~

WILDLIFE ACRES COMMUNITY  
 ASSOCIATION (HOA)

Claimant,

vs.  
 C-BASS MORTGAGE -  
 US BANK NAT'L ASSOC TRUSTEE

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: WILDLIFE ACRES COMMUNITY ASSOC.  
 Telephone Number: 360-724-3207 Address: 4792 WILDLIFE ACRES LN., SEDRO WOOLLEY, WA 98284
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: C-BASS MORTGAGE (FORCLOSURE OF PROPERTY - SUSAN HOPPE)
4. Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): 4918 WILDLIFE ACRES LN., SEDRO WOOLLEY, WA 98284
5. Name of the owner or reputed owner (If not known state "unknown"): C-BASS MORTGAGE
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:

(OVER)



Form No. P90 - Claim of Lien

BEBE

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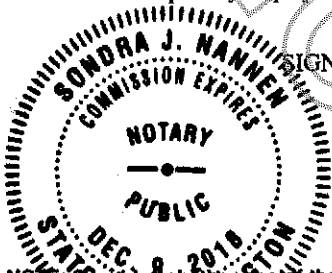
NO PART OF ANY WASHINGTON LEGAL BLANK FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.

7. Principal amount for which the lien is claimed is: \$ 1290.00  
(HOA DUES AND LATE FEES)

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

Pamela Burns 4792 WILDLIFE ACRES LANE  
CLAIMANT STREET ADDRESS  
PAMELA M BURNS SEDOO WOOLLEY WA 98284 360  
CLAIMANT'S NAME (TYPED OR PRINTED) CITY STATE ZIP PHONE  
STATE OF WASHINGTON, County of Sedro-Woolley Skagit ss. wa 98284  
Pamela Burns

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

Sondra J. Nannen  
April 26, 2016

Sedro-Woolley  
Notary Public for Washington  
My appointment expires 12-8-18

NOTE: Consider whether one of the following additional notarial certificates should be completed. See *Williams v. Athletic Field, Inc.*, 185 Wn.2d 444, 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:

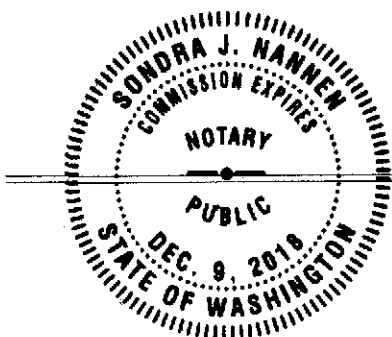
STATE OF WASHINGTON, County of Skagit) ss.

I certify that I know or have satisfactory evidence that

Pamela Burns 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 SECRETARY of WILDLIFE ACRES

COMMUNITY ASSO. (HOA) to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

DATED April 26, 2016



Sondra J. Nannen  
Notary Public for Washington  
My appointment expires 12-8-18