202110070108

10/07/2021 03:45 PM Pages: 1 of 2 Fees: \$204.50 Skagit County Auditor

AFTER RECORDING RETURN TO:

Fairhaven Legal Associates, P.S. 1023 S. 3rd St Mount Vernon, WA 98273

CLAIM OF LIEN

Samish River Park, Inc Claimant,	
VS.	j
Ryan Andrews)

NOTICE IS HEREBY GIVEN that the claimant below claims a lien pursuant to Chapter 64.38 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: ADDRESS:

Samish River Park, Inc 6990 Steelhead Lane Burlington, WA 98233

2. DATE ON WHICH THE Assessment Lien Commenced: 6-1-1

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Ryan Andrews

PROPERTY AGAINST WHICH A LIEN IS CLAIMED ADDRESS: 7240 Steelhead Lane.
Burlington, WA 98233.

- 5. LEGAL DESCRIPTION: Lot 2 Samish River Park Division No. 1, as per plat recorded in Volume 9 of Plats, pages 43 and 44, Records of Skagit County Washington. Situate in Skagit County Washington..
- 6. ASSESSORS PARCEL / TAX ID NUMBER: P#68677 XrefID 3990-000-002-0004
- 7. STATEMENT AND NOTICE OF VIOLATION: Pursuant to statute, claimant sent a statement to property owners on or about June 1, claiming in detail the full amounts due. More than 90 days have elapsed since the statement was mailed.
- 8. AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$1921.49.

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		Melissaerlenhach Samish River Park Claimant 10990 Steelhead In Burkington with 98232	001
		Claimant 10990 Steelhead In	~
		(Phone number, address, city and state of claimant)	
STATE OF WASHINGTON)		
COUNTY OF SKAGIT) SS.		
Meliosa Erlenbach	heing sworn says: I am the	claimant (or the attorney of the claimant, or	
foregoing claim, read and know	the contents thereof; and belie	eve the same to be true and correct and that the claim is not clearly excessive under penalty of perjury.	,
		or behalf of Samisa River Park Board of Trustees	_
STATE OF WASHINGTON)) SS.	Board of trastiles	
COUNTY OF SKAGIT)		
before me, and said person acknowledge	owledged that she/ he signed to the and acknowledged it as the	at Meline Every to the person who appeared this instrument, on oath and stated that she/he was he Claim of Lien for Samish River Park, Inc., to be the mentioned in the instrument.	
DATED this	ber ,2021 .		
	2838 2838 2838 2838 2838 2838 2838 2838	Print Name: Day Det NOTARY PUBLIC in and for the State of Washington, residing at MH Uernon, WA My Appointment Expires: 6-9-23	