

**AFTER RECORDING RETURN TO:
NORTHWEST LIEN SERVICES, LLC
1406 NE JADE ST.
ISSAQUAH, WA 98029**

CLAIM OF LIEN

WRIGHT WAY CLEANING AND RESTORATION, INC
Claimant.
VS
KATHERINE DEELY
(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: WRIGHT WAY CLEANING AND RESTORATION, INC**
Address: 2100 196TH ST SW, LYNNWOOD, WASHINGTON 98036
Telephone Number: (425) 712-5326
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: FEBRUARY 13, 2024**
3. **Name of person indebted to the Claimant: KATHERINE DEELY, 433 KCLICKITAT DR., LA CONNER, WASHINGTON 98257**
4. **Description of the property against which a lien is claimed:**
Address: 433 KCLICKITAT DR.,
LA CONNER, WASHINGTON 98257
LEGAL DESCRIPTION: LOT 433, SURVEY OF SHELTER BAY, DIVISION NO. 3, TRIBAL AND ALLOTTED LANDS OF SWINOMISH INDIAN RESERVATION, AS RECORDED IN VOLUME 43 OF OFFICIAL RECORDS, PAGES 839 THROUGH 842, UNDER AUDITOR'S FILE NO. 737014, AND AMENDMENT THERETO RECORDED IN VOLUME 66 OF OFFICIAL RECORDS, PAGE 462, UNDER AUDITOR'S FILE NO. 753731, RECORDS OF SKAGIT COUNTY, WASHINGTON.; DESCRIBED AS FOLLOWS: SKAGIT County Parcel No: P84430
5. **Name of owner or reputed owner (if not known state "unknown") KATHARINE L DEELY, 73 DOGWOOD LN., FRIDAY HARBOR, WA 98250**
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 29, 2024**
7. **Principal amount for which the lien is claimed: \$34,550.30 plus applicable lien fees &/or attorney's fees, costs &/or interest.**
8. **If the Claimant is the assignee of this claim so state here: N/A**

**WRIGHT WAY CLEANING AND RESTORATION, INC
2100 196TH ST SW,
LYNNWOOD, WASHINGTON 98036
(425) 712-5326**

By: John Crivello

**NORTHWEST LIEN SERVICES, LLC
JOHN CRIVELLO, MEMBER
1406 NE JADE ST.
ISSAQUAH, WA 98029
AUTHORIZED AGENT FOR WRIGHT WAY CLEANING AND RESTORATION, INC**

STATE OF WASHINGTON)

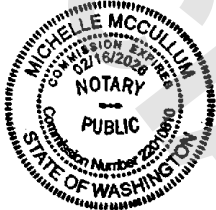
)ss

COUNTY OF KING)

JOHN CRIVELLO, 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.

John Crivello

Subscribed and sworn to before me this 25th day of JUNE 2024



Michelle McCullum
PRINTED NAME: MICHELLE MCCULLUM
NOTARY PUBLIC
In and for the State of Washington.
My commission expires: 2/16/2026

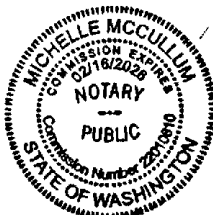
STATE OF WASHINGTON)

)ss

COUNTY OF KING)

On this 25th day of JUNE 2024, before me personally appeared JOHN CRIVELLO, 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, LLC, a Washington Limited Liability Company, that executed the within and foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said Company, 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 Company.

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



Michelle McCullum
PRINTED NAME: MICHELLE MCCULLUM
NOTARY PUBLIC
In and for the State of Washington.
My commission expires: 2/16/2026

Order #24-0402 Dated: 5/20/2024