

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY Jan. Nastasi-Harris

OCT 19 1 48 PM '94

AUDITOR  
GARY M. OLSON

BOOK 146 PAGE 536

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Jan I. Nastasi-Harris / Gordon L. Harris Jr.  
Claimant  
vs.  
Michael D. Sweeney  
Name of person indebted to Claimant

CLAIM OF LIEN

Notice is hereby given that the person named below claims a lien pursuant to chapter 64.01 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: Jan I. Nastasi-Harris / Gordon L. Harris Jr.  
TELEPHONE NUMBER: MS9 503-386-3857  
ADDRESS: POB 195 No. Bonneville, WA 98637
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: N/A
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Michael D. Sweeney
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): Taxpayer # 49715  
04-07-14-0-0-0500-00
5. NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): Jarmir's Home  
Administration of Gordon L. Harris Jr. / Jan I. Nastasi-Harris
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL OR EQUIPMENT WAS FURNISHED:
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$56,438.40 (FmHarris to Jarmir's Home)
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE:

Jan I. Nastasi-Harris  
Claimant  
JAN I. NASTASI-HARRIS  
Print or Type Name  
POB 195  
Address  
No. Bonneville, WA 98637  
MS9 503-386-3857  
Telephone Number

Claim of Lien  
Washington Legal Blank, Inc., Issued in WA Form No. 90-6/92  
MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER

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STATE OF WASHINGTON, COUNTY OF

Skamania

ss. }

Jan Nastasi-Harris

, 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.

Subscribed and sworn to before me this 19th day of October, 19 94.

Peggy B. Lowry

Notary Public in and for the State of Washington

My appointment expires: 2/23/95

PEGGY B. LOWRY  
STATE OF WASHINGTON  
NOTARY - PUBLIC  
My Commission Expires 2-23-95

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.