



202408190058

08/19/2024 12:46 PM Pages: 1 of 2 Fees: \$304.50
Skagit County Auditor

After recording return to:
Star Surveying
ATTN: Robert Anderson
P.O. Box 1343
Anacortes, WA 98221

CLAIM OF LIEN

Grantor (Owner of property whose property is being liened): James Macrae (AKA: James Harrison; James Harrison III)
Theodora Macrae (AKA: Theodora Jonsson; Theodora Jonsson-Macrae)

Grantee (Name of Lien claimant): Star Surveying INC
Robert Anderson, Owner

Abbreviated Legal Description: Parcel Number: P115709; Xrefid: 360324-1-004-0100 : NE 24 36 03

**Assessor's Property Tax
Parcel/Account No.:** P115709 P115710

Notice is hereby given that the person named below claims a Lien pursuant to RCW Ch. 60.04. In support of this Lien, the following information is submitted.

- Name of Lien Claimant:** Star Surveying
Address: P.O. Box 1343 Anacortes, WA98221
Telephone Number: 360-399-7693
- Date on which the claimant began to perform labor, provide professional services, supply Material or equipment or the date on which employee benefits contributions became due:**
June 6, 2023
- Name of the person or contractor indebted to claimant:**
James and Theodora Macrae
- Description of the property against which Lien is claimed (street address, legal description or other information that will reasonably describe the property):**
Parcel No: P115709/ P115710
Commonly know as: 18013/18012 Fox Hollow Lane, Bow WA 98232 (See Attached QCD AFN 202405240065 and SWD AFN 201802270048)
- Name of the owner or reputed owner (if not known state "unknown"):**
James and Theodora Macrae (AKA: James Harrison; James Harison III; Theodora Jonsson; Theodora Jonsson Macrae)
- The last date which labor was performed: professional services were furnished; contributions to an employee benefit plan were due; or material, or equipment was furnished:**
August 12, 2024
- Principal amount for which the Lien is claimed is:** \$10457.50
(This amount does not include interest, attorney fees and costs)

8. If claimant is the assignee of this claim so state here:

NO
X YES. State name of Assignor Robert M. Anderson

CLAIMANTS ATTESTATION

STATE OF WASHINGTON)
) ss.
COUNTY OF SKAGIT)

Robert M. Anderson, being sworn, says: I am the claimant or a person authorized to act on behalf of the claimant. 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.

Robert M. Anderson
Name and Title of Person Signing for Claimant

ACKNOWLEDGEMENT OF COMPANY CLAIMANT'S SIGNATURE

On this 16th day of August, 2024, before me personally appeared Robert M Anderson, to me known to be an individual claimant or authorized officer, attorney, or agent of the claimant company or LLC who executed the within and forgoing instrument and acknowledged said instrument to be the free and voluntary act and deed of said individual or corporate claimant, for the uses and purposes therein mentioned, and on oath stated that he or she was authorized to execute said instrument and that any seal affixed hereto is the corporate seal of said corporation.

In witness whereof I have hereunto set my hand and affixed my official seal this day.
(Signature and title of officer with place of residence of notary public.)

Nicole Nyberg
Printed Name: Nicole Nyberg
NOTARY PUBLIC in and for the State of
Washington Residing at: Skagit
My commission expires: Jan 19th 2028

