74.04.300.

\$ 38.859.00

Washington.

NOTICE IS HEREBY GIVEN:

NOTICE AND STATEMENT OF LIEN

WWI Clara L. Compher

Name COMPHER, Wilfred S. 30-E/F-007888-0 Case Number __ THAT THERE IS a debt due and owing the State of Washington by COMPHER, Wilfred S. and the State of Washington claims the right to file this lien in accordance with the provisions of RCW THAT THERE IS now due and remaining unpaid thereon, after deducting all just credits and offsets, the sum of , plus the maximum interest thereon allowable by law, in which amount the Department of Social and Health Services, State of Washington claims a lien upon ANY AND ALL OF THE REAL AND PERSONAL PROPERTY of the above named debtor situated in Skamania DEPARTMENT OF SOCIAL AND HEALTH SERVICES JOAOUIN RAMOS Financial Recovery Enforcement Officer II Joaquin Ramos Public in and for the State of ngton, residing at ppointment expires . Registered indexed, Di

State of Washington

County of Thurston

I certify that I know or have satisfactory evidence that ___ signed this instrument, in oath stated that (he/she) was authorized to execute the instrument and acknowledged it as an officer of the Department of Social and Health Services to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: <u>June 15, 1987</u>

RETURN TO:

epartment of Social and Health

Office of Financial Recovery P.O. Box 9501, MS OB-21 Olympia, Washington 98504 Phone: (206) 753-1325

DSHS 9 19A (Rev 5:86)

Indirect Filmed

Mailed