	Name ADAMS, Hazel B.
NOTICE AND STATEMENT OF LIEN	Case Number 95-A-000116-0
age when such assistance was paid. The sa authority of Chapter 283, Section 13, Law named deceased person, and in particula	amount of medical assistance paid on behalf sed person who was over sixty-five years of aid department asserts this lie under the s of 1987, against the estate of the above-
East % of the following tract of land: all of Northerly of the county road extending in as said Lot 6 of the Ignac Wachter Subdivision % of Section 36, Township 3 N, Range 7 E.W. now on file in the Office of the Auditor for cka: MPO 33R Maple Way, Stevenson, Washington	n easterly and westerly direction across of part of the West 5 of the Northwest M. as shown by the plat of said subdivision r Skamania County, Washington;
2 12 ST PM '88 AUCHERAL OLSON SARY H. OLSON	DEPARTMENT OF SOCIAL AND HEALTH SERVICES
State of Washington) County of Thurston)	PEGGY J. DeMIERO Financial Recovery Enforcement Officer II
instrument and acknowledged it as an offic	evidence that Peggy J. DeMiero hat (he/she) was authorized to execute the er of the Department of Social and Health of such party for the uses and purposes men-
Dated: September 19, 1988	Notary Public in and for the State of Washington, residing at Olympia My appointment expires
RETURN TO: Department of Social and Health Services Office of Financial Recovery P.O. Box 9501, MS OB-21 Olympia, Washington 98504 Phone: (206) 753-1325	PUBLIC 1-30-90 Indexed Sindexed Sindexe