

106027

BOOK 111 PAGE 325

Name CAMPBELL, Cindy D.

NOTICE AND STATEMENT OF LIEN

Case Number 30-F/C-007546-0

SSN: 535-70-1394

DOB: 05-16-65

NOTICE IS HEREBY GIVEN:

THAT THERE IS a debt due and owing the State of Washington by CAMPBELL, Cindy D.

and the State of Washington claims the right to file this lien in accordance with the provisions of RCW 74.04.300.

THAT THERE IS now due and remaining unpaid thereon, after deducting all just credits and offsets, the sum of \$ 3,361.75, 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 County, Washington.

FILED FOR RECORD
SKAMANIA CO. WASH

BY Sept 24 1988 Health

OCT 24 1 48 PM '88

E. M. Olson
AUDITOR

GARY M. OLSON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Joaquin Ramos
JOAQUIN RAMOS

Financial Recovery Enforcement Officer II

State of Washington

ss.

County of Thurston

I certify that I know or have satisfactory evidence that Joaquin Ramos 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.

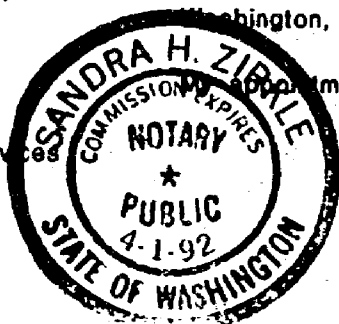
Dated: October 20, 1988

Sandra H. Zible
Notary Public in and for the State of Washington, residing at Olympia

Commission expires 09-01-92

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



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