

113644

BOOK /29 PAGE 29

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
OFFICE OF SUPPORT ENFORCEMENT (OSE)

## NOTICE AND STATEMENT OF LIEN (RCAV 74.20A.060)

11011	CÇ 13 11	EREDI GIVEIV.			
_	he Depa		Services (DSHS) claims that <b>Timothy</b> owes a debt for past due child supp		
SSN:	<del></del>	DC)6: 07/19/60	_ owes a deor for past due child supp	iont.	
That I	DSHS fil	es a lien in the amount of \$_	300.00 in Skamania	County on:	
X	A.	All real and personal prop	real and personal property of the debtor, and/or		
	<b>B</b> .	The property described be	elow		
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			$\mathcal{L}$	myan	
_			Authorized Representati	ve	
e			A	4.7	
STAT	E OF W	/ASHINGTON ) ) ss.		,	
Cou	nty of <u>C</u>	Clark)	(X)		
e e				46.	
l cer	tify that	S. Parr the above.	appeared before me ar	nd is known to me as the individual	
	_	O AND SWORN to before me	on 5-28-72		
SUB	SCRIBEL	AND SWORN to before the	on <u>3 4, 7 4</u>		
			Quan a	Dietor	
	30	, oran	NOTARY PUBLIC in an residing at	d for the State of Washington	
		PUBLIC	My commission expires	on 1-15 ,19 92	
15.				FILED FOR RECORD	
	; c .	Cr ws		SKAMAMEA OO WASH BY <u>DSHS</u>	
OF	FICE OF	be made to: SUPPORT ENFORCEMENT			
PO	W 39t Box 4	269		Jun 2 12 30 m '92	
		WA 98662-0269		J. Sowry	
(80	00) 345 :	998 <b>4</b>		GARY H. GLSON	
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ln r	eply, ref D#	: 887341			
. <u>.</u> 	•	Indexed, Indirect	υπ <u>γ</u>		
		TEMENT OF LIEN Filmed	19192		
	\$ 9-282 (Rev. PFC 11-01:	Mailed	<u></u>	ş1580 925527 111917ı	