113765

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

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

Sr DSHS

BOOK 129 PAGE 317

Jun 15 - 14 52, 111 '96

GARY E DESON

NO					

NOTICE IS HEREBY GIVEN:		
That the Department of Social and Health SSN: DOB: 12/26/5	h Services (DSHS) claims that <b>Victor</b> 7—owes a debt for past due child sup	B. Mcfall port.
hat DSHS files a lien in the amount of S	3390.13 in Skamania	County on:
A. All real and personal pro	perty of the debtor, and/or	
B. The property described	below	
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		$\sim$
	Authorized Representa	tive
STATE OF WASHINGTON )		
County of Clark ) ss.	X \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
I certify that A. Yong	appeared before me	and is known to me as the individual
who signed the above.		
SUBSCRIBED AND SWORM to before r	ne on 6-17-92	
	- Owned	P Desta
	NOTARY PUBLIC in a	nd for the State of Washington
	residing at <i>Uau</i>	con o
	My commission expire	
**	<b>⊣</b> ( ,√	
Inquiry shall be made to:	T We stered (*)	
OFFICE OF SUPPORT ENFORCEMEN 111 W 39th ST	indexed. Dir O	314
P O Box 4269 Vancouver WA 98662-0269	Indirect 0	6-01
(206) 690-7294	Filmed 7/7/42 Mailed	
<u> </u>		Z
In reply, refer to:		21/00 40
D#: 424310		,
NOTICE AND STATEMENT OF LIEN DSHS 9-232 (Rev. 189)		(1871 030817 082303)
SEC LEG 1131		(1871 920817 £64202)

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