STATE OF WASHINGTON BEFORE THE SECRETARY, DEPARTMENT OF SOCIAL AND HEALTH SERVICES

## NOTICE AND STATEMENT OF LIEN -- ALL PROPERTY

## NOTICE IS HEREBY GIVEN:

That there is a debt due and owing the Department of Social and Health Services by: Daniel O. Thorpe 528-78-1449 as the result of an assignment of support rights arising under a superior court order or arising under RCW 26.16.205 or RCW 74.20A.030 and established pursuant to RCW 74.20A.055,

That there is now due and remaining unpaid on said debt, after deducting all just credits and offsets, \$ 15,864.45. That the Department of Social and Health Services, State of Washington, pursuant to RCW 74.20A.060 claims a lien in the amount of said debt on all real and personal property of the above-named debtor.

| State of Washington ) ) ss  |   |
|---|---|
| County of Clark )   |   |
| On this day, the undersigned Notary                                       | Public in and for the state of Washington,  |
| do hereby certify that Joseph Y. P  | rather                                      |
| above instrument, and acknowledged tauthorized to execute this instrument |   |
| In witness whereof I have hereunto  | set my hand and affixed my official seal or |
|   | of, 19                                      |
|   |   |
| FILED FOR RECORD SKAMANIA 00 W SH   |   |
| DSHS  | Notary Public, State of Washington          |
|   | My commission expires on, 19                |

JUL 19 H 44 PH 188 AUDITOR CARYM. OLSON

Inquiry shall be made to:

DEPT OF SUCIAL 4 HEALTH SERV.

OFFICE OF SUPPORT ENFORCEMENT 5411 E. Mill Plain Road PO Box 4269, MS: S53-2 Vancouver, Wa 98662 -9989 (206) 690-4751

In reply, refer to D # 434299

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