106865

NOTICE AND STATEMENT OF LIEN

Name ANDERSON, Patricia Case Number 30-U-009727-0_

SS#-544-32-7864 DOB-03-05-32

NOTICE IS HEREBY GIVEN:

THAT THERE IS a debt due and owing the State of Washington by ANDERSON, Patricia in the amount of the public assistance granted during a period for which he/she would otherwise be ineligible due to the ownership of the property listed below. The State of Washington claims the right to file this lien upon the following described property in accordance with the provisions of RCW 74.04.007 and RCW 74.04.005(10)(f) as amended by Sec. 2, Chap. 335, Laws of 1985.

Beginning at the Southwest corner of the Southeast Quarter (SE $\frac{1}{4}$) of Section 17, Township 3 North, Range 8 E.W.M.; thence North 30 feet; thence East 30 feet; thence North 1,352.3 feet to the initial point of the tract hereby described; thence East 104.25 feet; thence North 104.25 feet; thence South 104.25 feet to the initial point.

FILED FOR RECORD SKAMPED 10. WASH DSHS APR 17 12 58 PH 109 of I have, inp. DEPARTMENT OF SOCIAL AND HEALTH SERVICES GARY Charlen Charlyn DeVoss Shipley Financial Recovery Enforcement Officer III State of Washington County of Thurston Charlyn DeVoss Shipley I certify that I know or have satisfactory evidence that

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: April 12, 1989 Notary Public in and for the State of Washington, residing at _ AH. GA 4-01-92 Registered

OF WASH

RETURN TO: Department of Social and Health Services Coffice of Financial Recovery
P.O. Box 9501, MS OB-21
Olympia, Washington 98504 P.O. Box 9501, MS OB-21 Olympia, Washington 98504 Phone: (206) 753-1325

DSHS 9-662 (Rev. 2/86) QX A-227

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