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

NOTICE AND STATEMENT (AF LIEN (RCW 74.20A.060)

BOOK 129 PAGE 6/2
FILED FOR RECORD
SKAMANIA OF WASH
BY DSHS

JUL 7 12 23 111 92 OSOWRY GARY M. OLSON

NOTICE IS HEREBY GIVEN.

That the Department of Social and Health Services (DSHS) claims that William H. B SSN: 536-76-0539 DOB: 03/18/63 owes a debt for past due child support.	allard	Registered /
That DSHS files a lien in the amount of \$ 9954.58 in Skamania	County on:	Indexed, Dir Lo
All real and personal property of the debtor, and/or		Filmed 7//5 9 Mailed
B. The property described below		Mana
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	C2 .	
Authorized Representative	gamed.	Constitution of the State of th
STATE OF WASHINGTON ) ) ss.		
County of Clark	\ \	
I certify that J. Garrett appeared before me and is kn	own to me as the	e individual
who signed the above.  SUBSCRIBED AND SWORN to before me on My 2,1992		<b>\</b>
MANA MANA		,
NOTARY PUBLIC OF and for the	e State of Washir	ngton
residing at Oak Out	uts 4	. 19 <b>9</b> 5
Wy Cosminssion expires of	The grant of the state of the s	and the second second
Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT 111 W 39th ST		
P O Box 4269 Vancouver WA 98662-0269		
(206) 690-4758		
In reply, refer to: D#: 842611		
NOTICE AND STATEMENT OF LIEN DSHS 9-282 (Rev. 1-89) IF G REL:11-9 11	(1368 920701 15	4724)