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BOOK /32 PAGE /5

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

NOTICE AND STATEMENT OF LIEN (RCW 74,20A.060) FILED FOR RECORD
SKAMADS #S

NOV 16 H WZ 111 92 COWYY GARY 11. OLSON

		- F	and the same and	Contract to the Contract of th
	Mr. 274	HERER	V ~ II	/CAI

NOTICE IS HEREBY GIVEN:			Registered	1
That the Department of Social and Health Services (D. SSN: 535-72-7651 DOB: 10/07/59 owes a d	lept for base and crime supports	dux County on:	Indexed Lir_Indirect Filmed 2/1/1	E G
That DSHS files a lien in the amount of \$ 3808.	00 in Skamania	_ County on:	Mailed	<u></u>)
X A. All real and personal property of the	dat tor, and/or			
B. The property described below		(λ)	•	
		777		
	1/0			
생물님들의 본지만 프로그램	Authorized Representative	<u></u>	Marie Company of the	Maluria (
	Authorized Representating			
STATE OF WASHINGTON				
County of Clark) ss.				
I certify that <u>V. Epperson</u>	appeared before me and is	known to me as	the individual	
who signed the above.	1 4 1007			, 10
SUBSCRIBED AND SWORN to before me on ADD	8 muer 10, 1992			
	Khonda Lu M	James	·	***************************************
	NOTARY PUBLIC in and for	the State of Wa	shington	
6	residing at <u>Canaly</u> My commission expires on	12-1	0 , 19 95	
A HOTAN	IMA COUNTINGSION EVALUES ON			

Inquiry shall be made to:
OFFICE OF SUPPORT ENFORCEMENT
111 W 39th ST
P 0 Box 4269
Vancouver WA 98662-0269

(206) 690-4680

In reply, refer to: D#: 602820

NOTICE AND STATEMENT OF LIEN DSH5 9-282 (Rev. 1/89) (FC REL 11 91)

(1694 921110 163039)