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

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

FRED TOR PECOND SKAME STATE BY DSHS DEC 6 16 29, ... 31.

NOTICE IS HEREBY GIVEN:			
That the Department of Social and Health Service SSN: 537-52-8815 DOB: 04/13/50 own			
That DSHS files a lien in the amount of \$ 2804	.00 in Skamania	County on:	Angistered
A. All real and personal property of the debtor, and/or			indexed Dir Indirect
B. The property described below			Filmer 12/28/9
	Authorized Representat	Wedled So	1
STATE OF WASHINGTON ) ) ss.			
County of Clark	X / I / I	1	
I certify that <b>K. Nichelson</b> who signed the above.	appeared before me ar	nd is known to me as t	he individual
SUBSCRIBED AND SWORN to before me on/	12-7-92		
	Dugnid	P. Jea	la_
	NOTARY PUBLIC in and residing at Uan	Sou UP Wash	nington
	My commission expires	on 8-10	, 19 <u><b>9_3</b></u> .
Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT 111 W 39th ST P O Box 4269 Vancouver WA 98662-0269		3. 45 - 0, 3. 45 - 0, 3. 3.78/	John John State Comments of the Comments of th
(206) 690-4762		4010	
In reply, refer to: D#: <b>732309</b>			
NOTICE AND STATEMENT OF LIEN DSHS 9-282 (Rev. 1:69) (FG REL 11:91)		(2176:921204.	(42950)

(2176:921204.142950)