



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  
SKAMANIA CO. WASH  
DSHS

MAR 19 9 25 AM '93

P. Lowry

GARY M. OLSON

115834

BOOK 134 PAGE 188

NOTICE IS HEREBY GIVEN:

That the Department of Social and Health Services (DSHS) claims that Michael R. Creighton  
SSN: 234-92-2790 DOB: 10/31/54 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 942.00 in Skamania County on:

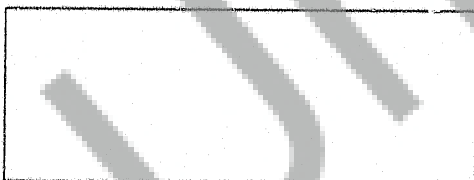
- ☒ A. All real and personal property of the debtor, and/or  
☐ B. The property described below

Authorized Representative

STATE OF WASHINGTON )  
County of Clark ) ss.

I certify that J. Kjer appeared before me and is known to me as the individual  
who signed the above.

SUBSCRIBED AND SWORN to before me on March 17, 1993



Sandra L. Archer  
NOTARY PUBLIC in and for the State of Washington  
residing at Vancouver  
My commission expires on 6-25, 19 96

Inquiry shall be made to:  
OFFICE OF SUPPORT ENFORCEMENT  
111 W 39th ST  
P O Box 4269  
Vancouver WA 98662-0269  
(206) 696-6391

In reply, refer to:  
D#: 846519



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