

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 BY DSHS APR 21 1 43 PM '93 D. Lawry

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116049	GARY M. OLSON
NOTICE IS HEREBY GIVEN:	
That the Department of Social and Health Servi SSN: 541-70-3045 DOB: 02/12/57 ow	
That DSHS files a lien in the amount of \$1	.447.00 in Skamania County on:
X A. / Il real and personal property of	
B. The property described below	
STATE OF WASHINGTON) SS. County of Clark)	Authorized Representative
I certify that <u>M. Markegard</u> who signed the above. SUBSCRIBED AND SWORN to before me on	appeared before me and is known to me as the individual April 20, 1993
	jungen ed sanser
S. C. C.	NOTARY PUBLIC in and for the State of Washington residing at Vancouver
Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT 111 W 39th ST P O Box 4269 Vancouver WA 98667 0269 (206) 696-6391	My commission expires on 12-/0, 19 9/5
	indexed, Dir 10
In reply, refer to: D#: 853687	Indirect 10 Filmed

NOTICE AND STATEMENT OF LIEN DSHS - 32 (Rev. 1789)

(fig REG:17/91) (01941:930420:075420) 83/36/87

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