



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

AUG 23 2 56 PM '93

P. Lowry
AUDITOR
GARY M. OLSON

117090

BOOK 137 PAGE 545

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 \$ 1680.00 in Skamania County on:

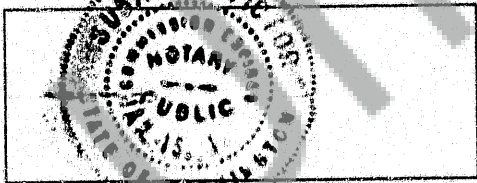
- ☒ A. All real and personal property of the debtor, and/or
☐ B. The property described below

[Signature]
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 8-20-93



Susan C. Vieten
NOTARY PUBLIC in and for the State of Washington
residing at Vancouver
My commission expires on 1-15, 1994

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

In reply, refer to:
D#: 846579

NOTICE AND STATEMENT OF LIEN
DSHS 9-282 (Rev. 1/89)

Registered	<u>h</u>
Indexed, Dir	<u>h</u>
Indirect	<u>h</u>
Filmed	<u>h</u>
Mailed	<u>h</u>

(FG REL: 11/91)
(0538/9308/073752)
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