

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 _ DSH/S

OCT 22 3 27 PH '93

AUDITOR O

GARY M. OL SON

NOTICE IS HEREBY GIVEN: 117734 That the Department of Social and Health Serv SSN: 533-64-4972 DOB: 05/21/56 ow	ves a debt for past due child	BOOK 138 PAGE 973 s G. Hathaway support.
That DSHS files a lien in the amount of \$_24\$ A. All real and personal property of B. The property described below		County on:
	Authorized Represent	Lllo ative
STATE OF WASHINGTON County of Clark Ss.		
certify that S. Mcgillis who signed the above. SUBSCRIBED AND SWORN to before me or.	appeared before me	and is known to me as the individual
OTAA)	NOTABY PUBLIC in all residing at	Miles Ind for the State of Washington K Chint Son March 30, 19 96

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

(206) 696-6393

In reply, refer to: D#: 678484

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IFG REL.11/91) (2474-931021-085923) 678484