



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

Nov 8 1 09 PM '93
P. Olson
AUDITOR
G. M. OLSON

117881

NOTICE IS HEREBY GIVEN:

BOOP PAGE 361

That the Department of Social and Health Services (DSHS) claims that David L. Pearson
SSN: 5-4-48-4688 DOB: 01/17/45 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 645.22 in Skamania County on:

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

Melanie W. Watters
Authorized Representative

STATE OF WASHINGTON)
County of Thurston) ss.

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

SUBSCRIBED AND SWORN to before me on November 3, 1993



Audrey A. Rich
NOTARY PUBLIC in and for the State of Washington
residing at Olympia
My commission expires on February 14, 1997

Inquiry shall be made to:
OFFICE OF SUPPORT ENFORCEMENT
6135 Martin Way
PO Box 9209, MS: 5964
Olympia Wa 98504-9209

(206) 438-8510

In reply, refer to:
D#: 972443

Registered _____
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