



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

MAR 4 4 29 PM '94

P. Olson
AUDITOR
GARY M. OLSON

118852

NOTICE IS HEREBY GIVEN:

BOOK 141 PAGE 737

That the Department of Social and Health Services (DSHS) claims that Daniel S. Cain
SSN: 528-94-5523 DOB: 02/07/62 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 1539.94 in Skamania County on:

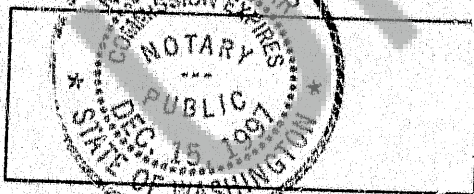
- ☒ A. All real and personal property of the debtor, and/or
☐ B. The property described below

Teri Hallingstad
Authorized Representative

STATE OF WASHINGTON)
County of Clark) ss.

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

SUBSCRIBED AND SWORN to before me on 3/3/94



Kelly Lee Murr
NOTARY PUBLIC in and for the State of Washington
residing at Vancouver
My commission expires on 12/15, 19 97

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

(206) 696-6391/TDD AVAIL.

In reply, refer to:
D #: 1022461

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