



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

JAN 26 12 57 PM '94

P. Olsson
AUDITOR

GARY M. OLSON

118597

NOTICE IS HEREBY GIVEN:

BOOK 141 PAGE 82

That the Department of Social and Health Services (DSHS) claims that Eylan W. Howell
SSN: 536-68-6885 DOB: 11/24/60 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 1133.84 in Skamania County on:

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

Olsson
Authorized Representative

STATE OF WASHINGTON)
County of Clark) ss.

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

SUBSCRIBED AND SWORN to before me on Jan 21, 1994



Elizabeth J. Dicks
NOTARY PUBLIC in and for the State of Washington
residing at Clark County
My commission expires on March 30, 1995

Inquiry shall be made to:
OFFICE OF SUPPORT ENFORCEMENT
111 W 39th ST
P O Box 4269
Vancouver WA 98662-0269
(206) 696-6331/TDD 690-4633

In reply, refer to:
D #: 1037183

Registered
Indexed, Cir
Indirect
Filmed
Mailed