FILED FOR RECORD
SKAMANIA CO. WASH
BY DSHS
Jun 3 2 46 PM '94
G. Lavry
AUDITOR
GARY M. OLSON

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
OFFICE OF SUPPORT ENFORCEMENT

NOTICE AND STATEMENT OF LIEN
(RCW 74.20A.060)

119512

BOOK 143 PAGE 581

NOTICE IS HEREBY GIVEN:

That the Department of Social and Health Services (DSHS) claims that Karla A. Cain
SSN: 540-04-0912 DOB: 07/23/62 owes a debt for past due child support.

That DSHS files a lien in the amount of $ 714.00 in Skamania County on:

[X] A. All real and personal property of the debtor, and/or

[ ] B. The property described below

ANY AND ALL PROPERTY BELONGING TO KARLA A. CAIN, AKA KARLA A. HANKIN

T. Hallingstad
Authorized Representative

STATE OF WASHINGTON)
) ss.
County of Clark)

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 6/2/94

NOTARY PUBLIC
KELLY LEE MUIR
COMMISSION EXPIRES
JULY 15, 1997
STATE OF WASHINGTON

Kelly Lee Muir
NOTARY PUBLIC in and for the State of Washington
residing at Vancouver
My commission expires on JULY 15, 1997.

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#: 943109

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

(FC REL:11/91)
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