



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

JUL 14 3 32 PM '94
P. Olsson
AUDITOR
GARY M. OLSON

NOTICE IS HEREBY GIVEN:
120009

BOOK 144 PAGE 521

That the Department of Social and Health Services (DSHS) claims that Ellen S. Rose
SSN: 543-64-1394 DOB: 01/13/52 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 137.50 in Skamania County on:

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

[Signature]
Authorized Representative

STATE OF WASHINGTON)

County of Clark) ss.

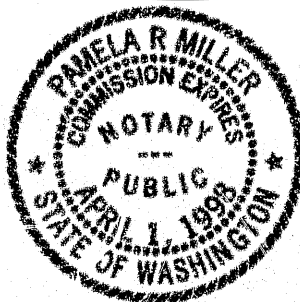
I certify that B. Montgomery appeared before me and is known to me as the individual who signed the above.

SUBSCRIBED AND SWORN to before me on 7/13/94

Pamela R. Miller
NOTARY PUBLIC in and for the State of Washington
residing at Bush Prairie
My commission expires on 4/1/98

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#: 1034363



Registered _____
Indexed, Or _____
Indirect _____
Filed _____
Mailed _____