

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES OFFICE OF SUPPORT ENFORCEMENT (OSE)

FILED FOR RECORD SKAMAHIA CO. WASH BY DSHS

Oct 10_12 05 PM *94

GARY M. OLSON

NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

DECE 202

	160,00		BOOK 146 PAG	GE JAC
The Departme social security	nt of Social and Health Services (DS number 552-35-9587 date of	SHS) claims that Kevin P. of birth 06/13/64 owes a	Holt a debt for past-due child s	upport.
DSHS files a lie	en in the amount of \$ 4418.81	in <u>Skamania</u>	County on:	
1.	All real and personal property of t	he above-nuned debtor (e	xcept Tribal Trust property	y), and/or:
2.	The property described below.		.\0	
		Authorized	And Nana Representative	
		OFFICE OF	SUPPORT ENFORCEMENT	
State of Wash	nington)			\
County of C1		7 .		A .
I certify that §	S. Parr	appeared	before me and is known t	o me as the
individual who	o signed the above.			
Date: 10 (2594	2	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the O	1er Veer
		Notary Pub	$\wedge =$	7107
		Му арро	intment expires ()	<u> </u>
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Direct question	ons to: UPPORT ENFORCEMENT		10000	
5411 E MIL	L PLAIN BLDG 3			
P O BOX 42 VANCOUVER (800) 345-	WA 98661-0269		OF WASHING	Registered Indexed, Dir Indirect

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (Rev. 12/93)

Case #: 996706

In reply, refer to:

(FG REL:08/94) (1580:941004:143657) 998706

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