

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

NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

121145

BOOK 147 PAGE 222

social security number 533-04-2730			ept for past-due child support.
SHS files a lien in the amount of \$	164 .00	in Skamania	County on:
All real and personal p	roperty of the a	above-named debtor (exc	ept Tribal Trust property), and/or:
The property described	d below.		
		_	70.
	FILED FUI	RECORD	
	SKAMAMIA	CO. WASH) `
	BY D≨	LAXNO	nen-
	Nov 28 4	44 PM 194 Authorized Repr OFFICE OF SUP	resentative PORT ENFORCEMENT
tate of Washington) 4001	TOR	
ounty of Clark) ssGARY M.		
The second secon			
certify that L. Dhanens Idividual who signed the above.	WHEN WHE WINDS AND IN SECTION AND ADDRESS.	appeared before	ore me and is known to me as the
ate: <u>11-21-94</u>	Ψ.	- Sha	an C. 418
Contraction Contraction		Notary Public	
S. 100	And Annual Control of the Control of	My appointm	ent expires 1-15-96
NOTAN,			
Z COLICE S	, A		
WARN	and the state of t		
rect questions to:			
FFICE OF SUPPORT ENFORCEMENT 111 E NILL PLAIN BLDG 3			
O BOX 4269			Registered
ANCOUVER WA 98662-0269			indexed. Oir
(06) 696-6391			Indirect /
reply, refer to:			rumen Mailed
Case #: 1095099			Section of the second in the s

NOTICE AND STATEMENT OF LIEN DSHS 09-202 (Rev. 12/93)

3-8-17-4-5140

(FG REL:08/94) (1314:941118:114924) 1096099