

128920

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

## NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

BOOK /S/ PAGE 442

The Department of Social and Health Services (DSHS): Jaims that James B. Renner social security number 534-70-8679. Jate of birth 07/31/65 owes a d. bt for past-due child support.				
DSHS files a l	ien in the amount of $\$$	537,29	in <b>Skamania</b>	County on:
1. All real and personal property of the above-manied debtor (except Tribal Trust property), and/or:				
2.	The property described	f below.	Authorized Rep	resentative PORT ENFORCEMENT
State of Wash County of <b>QJ</b>	v	) ) \$\$. .)		O'
appeared before me and is known to me as the individual who signed the above.				
Date: 7/27/95			Notary Public  My appointn	nent expires 9/23/98
L.V	WAS	and the state of t	FILED FOR SKAMANIA COBY DS	REGORD O. WASH HS
	ions to: SUPPORT ENFORCEMENT LL GLAIN DLOG 3	(		ory
P O BOX 42	269 WA 95062-0269		GARYM. O	LSON Seeved the
In reply, refe Case	er to: e #: 952503			ndi ed
NOTICE AND STATE ESHS 09-282 (Rev.				(FG MEL:08:04) (08:06:05:0727:071-015) 952503