

NOTICE AND STATEMENT OF LIEN DIMS 08-282 (Rev. 12/93)

Case #: 1013972

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

FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

HOV 22 3 37 PH '95

P Sawry

AUDITOR

GARY M. OLSON

(FG REL:09/85) (6663:851120:010031)/ 1013972

## NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

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The C social	Departm   securit	ent of Social and Health y number <u>538–72–088</u> 0	Services (DSHS)  date of b	claims that <b>Robert J.</b> i irth <u>05/06/50</u> owes a d	<b>Geana</b> n ebt for past-due o	child support.		
DSHS files a lien in the amount of \$				in <u>Skamania</u>	County on:			
1.	Œ	All real and personal property of the above-named debtor (except Tribal Trust property), and/or:						
2	C	The property described below.						
			Autho OFFIC			ized Representative OF SUPPORT ENFORCEMENT		
State	of Was	hington						
Coun	ity of <u>C</u>	lark	) \$S. 					
I certify that M. Combs individual who signed the above.				appeared before me and is known to me as the				
Date:	: <del>U</del> Du	emilourz1.95			allochull			
<del></del>					nent expires 5	ept30,99		
		ions to: SUPPORT ENFORCEMEN		OFF Prop.		emisimes 🔀		
100	BOX 4	LL PLAIN BLDG 3 269		CONTRACTOR OF THE		fadesed, Our		
VANC		WA 98662-0269			r S	Harve Maried		
In re	ply, refe	er to:		100				