

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

NOTICE AND STATEMENT OF LIEN

(RCW 74,20A)

123992			4 page 122
The Department of Social and Health Services (DSHS) social security number 533-02-2315 date of bir	claims that <u>Steven A</u> th 10/08/73 owes a	, Goncalves	Child Support
DSHS files a lien in the amount of \$ _15.048.00	in Skamania	County	
All real and personal property of the ab			The state of the s
2. The property described below.			roperty), and/or:
	<u> 51.uu</u>	wood	
	Authorized Re OFFICE OF SU	presentative JPPORT ENFORCEMEN	т. Н. Г.,
tate of Washington			
oundy of <u>Thurston</u> } ss.			
certify that S. Wescott Idividual who signed the above.	appeared be	fore me and is kno	we to each the
Pate: 12-5-65	Notary Public	Coming	Marks
SS NO TAR	My appointr	ment expires	7-10-87
(*) 00 L10	3	SKAM	D FOR RECORD IANIA CO. WASH 25.HS
rect questions to: FICE OF SUPPORT ENFORCEMENT		Dec	B. 442 PM '95
35 Wartin Way		· · ·	Lawry
Box 5309, MB: 5864 YMP1// Wa 98507-9209			AUDITOR YM. Olson
60) <u>4</u> 38–8510		301)	
reply, refer to:			Indexed, Dir s
Case #: 1130103			Indirect L
CE AND STATEMENT OF LIEN 3 09-282 (Rey. 12/33)		(FG REL:	ëlimed Målle d
		(9493:95 112810	1126:192434)/