

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

Mar 26 3,13 PH '96

O Kawny

AUDITOR

GARY M. OLSON

(PG NEL;09/95) (0824:960321;180621)/ 383459/0824

NOTICE AND STATEMENT OF LIEN

(RCW 74,20A)

The Departi social sucur	124873 ment of Social and Health S rity number	iervices (DSHS) , date of b	claims that Donald L. irth 08/09/53 owes a c	COOK 156 Harris ebt for past-due child	
DSHS files i	a lien in the amourt of \$	816.00	in <u>Skanania</u>	County on:	
ı. 🛭	All real and personal pr	operty of the a	bove-named debtor (exc	ept Tribal Trust prope	rty), and/or:
	The property described	l below.		\mathbb{N}^c	
			(1) /2	1	Λ
			Authorized Rep OFFICE OF SUP	resentative PORT ENFORCEMENT	<u> </u>
tate of Wa	shington)			
ounty of g	lark) s s.)			4
certify that	K. Fisher		appeared be(ore me and is known	to me ac the
dividual w	ho signed the above.	4			to me as me
ate: 🛋 ኋ				N. T.	
	-9-5-91		Notary Public	wwwek	<u> </u>
	St. Harris		Иу appointm	ent expires <u>365</u> -	- n
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FFICE OF S 11 E MII O BOX 42 MCCUVER	ions to: SUPPORT ENFORCEMENT LL PLAIN BLDG 3 169 WA 98662-0269				
FFICE OF S 11 E MI O BOX 4: MCCUVER	ions to: SUPPORT ENFORCEMENT LL PLAIN BLDG 3 169 WA 98662-0269	<u>/</u> l			Sm istoco
#11 E MII #0 BOX 4: ABCCUVER 360) 696-	ions to: SUPPORT ENFORCEMENT LL PLAIN BLDG 3 269 WA 98662-0269 -6391	<u>/_</u> _l			See Stores Indexed, 1) Indirect Filmes