

NOTICE AND STATEMENT OF LIEN DSHS 09-242 (Rev. 12/93)

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

## NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

AUG 9 3 35 PH '96

CARY M. OLSON

(PG REL:08/95) (0834:960806:180617)/ 1136043/0824

The Densi	125973	. 11		BOOK 158	PAGE 930
social secu	tment of Social and Health : urky number	ervices (DSHS) date of bi	claims that <b>Kimberly</b> irth <b>05/15/68</b> owes a	C Cutton	
DSHS files	a lien in the amount of \$_				
1. G2				County	
	sa and personal pr		bove-named debtor (ex	cept Tribai Trust p	roperty), and/or:
2.	The property described	The property described below.		<b>N</b> (	
				4.3	
			$\mathbb{C} A \setminus \mathbb{A}$		
			$\star$	T = -	
		W	Authorized Re	presentative	
State of Wa	shington		OFFICE OF SU	PPORT ENFORCEMEN	
		) ss.			
County of C	lark				
I certify that	K. Fisher		appeared be	fore me and is kno	
iudiviansi M	ho signed the above.			ore the and is kill	wit to me as the
		•		$\sim$	
Date: <u>9</u> _9	112.1		Jusa	il De	Sale
			Notary Public		
150			My appointn	nent expires <u>1-</u>	5-00
	S. Harvin				
13	NO CONTRACTOR				
	OF MYSHLA				
Prect questi	ons to:				
OFFICE OF S	UPPORT ENFORCEMENT				
O BOX 43	<b>49</b>				
AMCOUVER (360) 696-	WA 98662-0269 6391				Suprames /
					Mareked, Sir
reply, refer					Editect /