

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 GO. WASH BY DSHS

Oct 3 4 33 PM '96 Polavny AUDITOR GARY M. OLSON

	1/ 355		F
		BOOK 159 PAGE 834	
The Departm	ent of Social and Health Services (DSHS) claims	that Peter M. Swavze	
social security	y namer, date of birth 03/	27/63 owes a debt for past-due child support.	-
DSHS files a l	lien in the amount of \$ 13,024.98 in si	kamania County en:	
1. 🖼	All real and personal property of the above-na	med debtor (except Tribal Trust property), and/or:	
2.	The property described below,		
		1	
		CHUAS	
		Authorized Representative OFFICE OF SUPPORT ENFORCEMENT	
State of Wash	ington )		
County of Cla	) ss.		
I certify that K	. Fisher	appeared before an end to be	

Data: 1001 50

individual who signed the above.

appeared before me and is known to me as the

My appointment expires 577

Direct questions to: OFFICE OF SUPPORT ENFORCEMENT 5411 B MILT PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98662-0269 (360) 696-6391

in reply, refer to:

Case #: 394165

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NOTICE AND STATEMENT OF LIEN OSHS OF 182 (Rev. 12/93)

(FG REL:09/95) (0824:861001:180809)/ 394166/0824