

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

FILED FOR RECORU SKAPAGIA DO WASH BY DSHS

Nov 12 3 38 TY '96

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AUDITOR O

GARY M. OLSON

NOTICE AND STATEMENT OF LIEN

(RCW 74,20A)

The Department of Social and Health Services (DSHS) claims that Timothy F. Meamber social security number ______, date of birth 10/29/62 owes a debt for past-due child support.

DSHS files a lien in the amount of \$ 284.13 in Skarania County on:

1. All real and personal property of the above-named debtor (except Tribal Trust property), and/or:

2. The property described below.

Authorized Representative
OFFICE OF SUPPORT ENFORCEMENT

State of Washington

County of King

I certify that A. France individual who signed the above.

appeared before me and is known to me as the

Date: 1/5/96

My appointment expires

Direct questions to:
OFFICE OF SUPPORT ENFORCEMENT
500 First Avenue S
M3: M17-28
Seattle Wa 98104-2830

(206) 464-7020

NOTICE AND STATEMENT OF LIEN DSH5 09-282 (Rev. 12/93) Indexed, Dir Indirect Filmed Mailod

(FG REL:08/95) (1845:981 104:184342)/ 1223861/1645