

115114

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Register

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

**NOTICE AND STATEMENT OF LIEN**  
(RCW 74.20A.060)

By DSHS

Dec 6 1992

G. J. J. J. J.

**NOTICE IS HEREBY GIVEN:**

That the Department of Social and Health Services (DSHS) claims that **Michael D. Vanderslice**  
SSN: [REDACTED] owes a debt for past due child support.

That DSHS files a lien in the amount of \$ **1094.00** in **Skamania** County on:

- ☒ A. All real and personal property of the debtor, and/or  
☐ B. The property described below

*Ken Nygaard*  
Authorized Representative

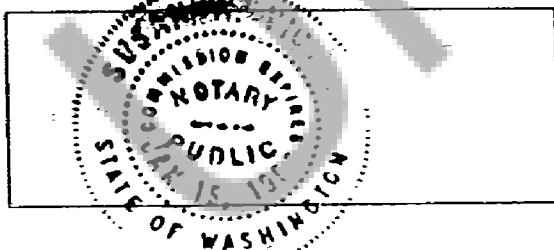
STATE OF WASHINGTON )

) ss.

County of **Clack** )

I certify that **K. Nygaard** appeared before me and is known to me as the individual who signed the above.

SUBSCRIBED AND SWORN to before me on **12-7-92**



*Susan A. Factor*  
NOTARY PUBLIC in and for the State of Washington  
residing at **Vancouver**  
My commission expires on **1-15**, 19 **96**

Inquiry shall be made to:  
**OFFICE OF SUPPORT ENFORCEMENT**  
111 W 39th ST  
P O Box 4269  
Vancouver WA 98662-0269

(206) 696-6047

In reply, refer to:  
D# **937778**

Registered  
Issued, by  
[REDACTED]  
Date **12/28/92**  
[REDACTED]