

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
OFFICE OF SUPPORT ENFORCEMENT (OSE)
NOTICE AND STATEMENT OF LIEN
(RCW 74.20A.060)

FILED FOR RECORD
SKAMANIA CO. WASH
BY DSHS

JUN 30 9 27 AM '94

P. Lasny
AUDITOR
GARY M. OLSON

BOOK 144 PAGE 183

NOTICE IS HEREBY GIVEN:

119851

That the Department of Social and Health Services (DSHS) claims that Bobby J. Jones
SSN: [REDACTED] DOB: 01/01/45 owes a debt for past due child support.

That DSHS files a lien in the amount of \$ 5963.83 in Skamania County on:

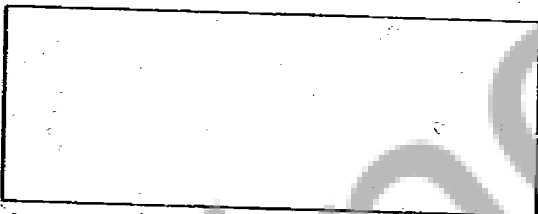
- ☒ A. All real and personal property of the debtor, and/or
☐ B. The property described below

[Signature]
Authorized Representative

STATE OF WASHINGTON)
County of Clark) ss.

I certify that S. Leavell appeared before me and is known to me as the individual
who signed the above.

SUBSCRIBED AND SWORN to before me on 06 28 94



Ellen Vander Vein
NOTARY PUBLIC in and for the State of Washington
residing at Clark County
My commission expires on 05 01, 19 97

Inquiry shall be made to:
OFFICE OF SUPPORT ENFORCEMENT
111 W 39th ST
P O Box 4269
Vancouver WA 98662-0269
(206) 696-6391/TDD AVAIL.

In reply, refer to:
D #: 604406

NOTICE AND STATEMENT OF LIEN
DSHS 9-282 (Rev. 1 89)

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