

## 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

AUDITOR OGARY M. OLSON

NOTICE IS HEREBY GIVEN:  119876  That the Department of Social and Health Serv			GE 247
S\$N; DOB: ov	ves a debt for past due child s	upport.	
"That DSHS files a lien in the amount of \$	449.25 in Skamania	County on:	
A. All real and personal property	of the debtor, and/or		-
B. The property described below		. ^ \	k.
		*. • / <b>/</b> / `	•
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	Calledon	المماد	:
	Authorized Represer	ntative	·
	/X \ \ \		
STATE OF WASHINGTON )			
County of Clark ) ss.	J .		•
		1	•
I certify that C. Boban	appeared before m	e and is known to me as the in	dividual
who signed the above.	06-79-94	$\Gamma$	
SUBSCRIBED AND SWORN to before me on	06-29-99	<b>4</b> 1 )	•
	71100	VantorVeen	
	NOTARY PURLIC I	and for the State of Washingt	on
	residing at My commission exp		19 97.
	<b>1</b>		:
Inquiry shall be made to: OFFICE OF SUPPORT ENFORCEMENT		CH L VAMOE	
111 W 39th 87 P O Box 4269		Washington Charles	
Vancouver WA 98662-0269		* CHUNAPLE Z	
(206) 696-6391/TDD AVAIL.		WIND UBLIC	
		The state of the s	e e e e e e e e e e e e e e e e e e e
In reply, refer to:  D#: 1004125			edexed bis
DA: TAAST23			व्यक्ति ।
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