

122221

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

NOTICE AND STATEMENT OF LIEN

(RCW 74.20A)

The Department of Social and Health Social security number		claims that Thomas rth 09/14/46 owe		st-due child sup	port.
DSHS files a lien in the amount of \$	2355.00	in Skamania	<u></u> .	County on:	ſ.
1. All real and personal pr	operty of the a	bove-named debtor	(except Tribal	Trust property),	and/or:
2. The property described	below.	×. (- 47	.	
FILED FOR RECOR SKAMANIA GO. WAS BY DSHS		$\times //$			
May 2 4 31 PM Courty AUDITOR GARY M. OLSO		Authorize Office C	rulin) ed Representative OF SUPPORT ENFO	PECENIENI	
State of Washington County of Clark)) ss.)		X) ;)
I certify that K. Buir individual who signed the above. Date: 5	(2	u cin	nd is known to a	ne as the
Course Co		Notary P My app		res <u>\-\\$ -</u>	96

Direct questions to:
OFFICE OF SUPPORT ENFORCEMENT
5411 R NILL PLAIN BLDG 3
P O BOX 4269
VANCOUVER WA 98562-6269
(206) 696-6391

In reply, refer to:

Case #: 545235

NOTICE AND STATEMENT OF LIEN DSHS 09-242 (Rev. 12.93)

90-008560

Indirect
Filmed
Metled

(FG REL:08/84) (0823:950438.114081) 548235

BOOK 149 PAGE 652