

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

FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

## NOTICE AND STATEMENT OF LIFN

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(OCH 74.204)	AUDITOR /
(RCW 74.20A)	GARY M. OLSON
125254	BOOK 157 PAGE 184
The Department of Social and Health Services (DSHS) claims that James R. Bo	ese
social security number, date of birth <u>08/20/56</u> owes a de	bt for past-due child support.
DSHS files a lien in the amount of \$ 22,446.11 in Skamania	County on:
1. All real and personal property of the above-named debtor (except	ot Tribal Trust property), and/or:
2.	
Authorized Repre	schtative ORT ENFORCEMENT
	SAT ENTORCEMENT
State of Washington ) ss.	
County of Chelan	
I certify that C. Van Arnam appeared befo individual who signed the above.	re me and is known to me as the
Date: 5/13/9/6 Notary Rublic	
My appointment of the state of	nt expires
Direct questions to:	
OFFICE OF SUPPORT ENFORCEMENT	
805 S. Mission St.	
PO Box 2929, MS: B4-10 Wenatchee Wa 98807	
(509) 662-0404	Step mores
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in nank rafar to	indirect

Case #: 1078617

NOTICE AND STATEMENT OF LIEN DSHS 89-262 (Rev. 12/93)

(FG MEL:08/95) (2781:999512:982310)/ 1078617/2761