125448

BOOK 157 PAGE 637

Name: GEE SHARI L Social Security #: 542-80-8634 Case Number: 30-C-009442-0

NOTICE AND STATEMENT OF LIEN

NOTICE IS HEREBY GIVEN:

A debt is due and owing the State of Washington by GEE, SHARI L in the amount of the public assistance granted during a period for which they would otherwise be ineligible due to the ownership of the property listed below. The State of Washington claims the right to file this lien on the following described property in accordance with the provisions of RCW 43.20B.670 and RCW 74.04.005(10)(f) as amended by Section 2, Chap. 335, Laws of 1985.

PARCEL #03 08 17 4 0 0903 00 12 DILLINGHAM LOOP EXTENSION **SKAMANIA COUNTY**

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

FILED FOR RECORD SKAPULYA GOLWASH -DSHS____

JUN 10 11 54 AX 196 O Lowry GARY M. OLSON

State of Washington

County of Thurston

I certify that I know or have satisfactory evidence that TAMIE COMSTOCK is the person who appeared before me, and said person acknowledged that he/she signed this instrument, on oath stated the he/she was authorized to execute the instrument and acknowledged it as an officer of the Department of Social and Health Services to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

Dated: 06/03/96

Notary Public in and for the State of Washingto

My appointment expires 0

RETURN TO:

ant of Social and Health Services Office of Financial Recovery P.O. Box 9501 Olympia, Washington 98507-9501 Phone: (206) 753-1325 (Olympia)

1-800-562-6114 (Washington toli free)

PC 9-19A