

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

NOTICE AND STATEMENT OF LIEN

FILED FOR RECORD SKAHANIA CO. WASH BY \_D\$H5\_\_\_\_

Jul 26 3 08 PH 36

AUDITOR

- 1	125836	(RCW 74,20A)		RYH. OLSON
The Departm social securit	ent of So <u>cial and Health Services</u>	(DSHS) claims that William , te of birth 02/01/71 owes a	BOOK /58  J. Suver  debt for past-due ch	- B AFT
DSHS files a	lien in the amount of \$6,235.		County or	
1.	All real and personal property of	of the above-named debtor (e	ccept Tribal Trust prop	perty), and/or:
2.	The property described below.			
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• •		d	TILL	$\Sigma$
		Authorized R OFFICE OF S	epresentative UPPORT ENFORCEMENT	
State of Wash	hington )			-
County of C1	) 55.   lark	7 7		
I certify that I	K. Pisher o signed the above.	appeared b	efore me and is know	n to me as the
Date: 0	62396	Notary Publi	lenvar	lerleen
	WADES	. My appoir	tment expires	50197

Direct questions to:
OFFICE OF SUPPORT ENPORCEMENT
5411 B MILL PLATH BLDG 3 P O BOX 4269 VANCOUVER WA 98662-0269 (360) 696-6391

in reply, refer to: Case #: 637090

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (Rev. 12/93)

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