

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

## NOTICE AND STATEMENT OF LIEN

FILED FOR RECORD SKAHAR A CO. WASH BY DSHS

AUG 9 3 35 Pil '96 AUDITOR

	(!	RCW 74.20A)	GARY H. OLSO	) N
125973	•	Bo	208 158 page 93	
The Department of Social and Health Ser	vices (DSHS)	i Claims that <b>Kimberl</b> y s	Sutton	
social security number	, date of b	irth <u>05/15/68</u> owes a c	ebt for past-due child support.	
DSHS files a lien in the amount of \$	400.00	in <u>Skamania</u>	County on:	
1. 🖬 All real and personal prop	perty of the a	above-named debtor (exc	ept Tribal Trust property), and/or:	
2.  The property described b			ept mod trust property), and/or:	-
inc property described to	eiuw.	. E . S	<b>\</b>	
	4	P 34 3		
	o i			
		<b>X</b> 7/6	, .	
		A S	t	
	400	Authorized Rep	resentative	
	•	OFFICE OF SUF	PORT ENFORCEMENT	h.,
State of Washington	SS.			7
County of Clark	55.			
I certify that K. Fisher	7		- 14 - 1	
individual who signed the above.		appeared bei	ore me and is known to me as th	e .
	<b>.</b>		$\neg$	
Date: 9-9-91	*		(	
33 1 / 3 0 d d d d d d d d d d d d d d d d d d		Notary Public	u Chillistan	<del></del>
		My appointm	nent expires 1-15-00	
3 ANOTAR F		in appoins	1-15-00	
Mail S				•
18, 20, 20				
OF KYCHI	·—J			
Direct questions to:	ts.			
OFFICE OF SUPPORT ENFORCEMENT 5411 B MILL PLAIN BLDG 3				
P O BOX 4269		-		
VANCOUVER WA 98662-0269 (360) 696-6391			<b>∮m</b> isiret	/
(240) 636-633T	- ب اي		ledexed, Dir	了
In reply, refer to:	•		Indirect	
Caco de 112cour	-		វិធីតាខ្ <b>រំ</b>	