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BOOK 161 PAGE 732

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SKAMANIA CO. WASH
BY DSHS

RETURN ADDRESS:

Office of Support Enforcement
P.O. Box 4269
Vancouver, WA 98662-0269

JAN 6 2 37 PM '97

P. Lowry
AUDITOR
GARY H. OLSON

Please Print or Type Information.

Document Title(s) or transactions contained therein: 1. <i>Notice and Statement of Lien</i> 2. 3. 4.
GRANTOR(S) (Last name, first, then first name and initials) 1. <i>Steven G. Bremer</i> 2. 3. 4. <input type="checkbox"/> Additional Names on page _____ of document.
GRANTEE(S) (Last name, first, then first name and initials) 1. <i>State of WA, DSHS</i> 2. 3. 4. <input type="checkbox"/> Additional Names on page _____ of document.
LEGAL DESCRIPTION (Abbreviated: I.E., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter) <i>N/A</i> <input type="checkbox"/> Additional Names on page _____ of document.
REFERENCE NUMBER(S) Of Documents assigned or released: <i>N/A</i> <input type="checkbox"/> Additional Names on page _____ of document.
ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER <i>N/A</i> <input type="checkbox"/> Property Tax Parcel ID is not yet assigned. <input type="checkbox"/> Additional Names on page _____ of document.
The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.

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

FILED FOR RECORD
SKANIA CO. WASH
BY DSHS

JAN 6 2 37 PM '9
O'Leary
 AUDITOR
 GARY M. OLSON

DSHS files a lien in the amount of \$ 37,620.06 in Skamania County on:

1. ☒ All real and personal property of the above-named debtor (except Tribal Trust property), and/or:
2. ☐ The property described below.

Authorized Representative
OFFICE OF SUPPORT ENFORCEMENT

State of Washington

County of Clark

I certify that V. Russell appeared before me and is known to me as the individual who signed the above.

Date: 12-31-96

Notary Public

My appointment expires 6-25-2000



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

In reply, refer to:
Case #: 134709 623159

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

(FG REL:09/95)
(2640:961230:180319)/
134709/2640

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