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300K 166 PAGE 407 FILED FOR RECORD SKAMAYIA CO. WASH BY DSHS Jun 23 4 33 PM 197
PXQUITOR
GARY M. OLSON

RETURN TO. Department of Social and Health Services Office of Financial Recovery P O Box 9501 Olympia, Washington 98507-9501



NOTICE AND STATEMENT OF LIEN

GRANTOR/DEBTOR: JENSEN, FRANCES J SOCIAL SECURITY NUMBER:

BIRTHDATE: 05-29-45

GRANTEE/CREDITOR: DSHS, OFFICE OF FINANCIAL RECOVERY

NOTICE IS HEREBY GIVEN:

THAT THERE IS a debt due and owing the State of Washington by FRANCES J JENSEN and the State of Washington claims the right to file this lien in accordance with the provisions of RCW 74.04.300 and 43.208.620.

THAT THERE IS now due and remaining unpaid thereon, after deducting all just credits and offsets, the sum of \$1,019.00 plus interest allowable by law, in which amount the Department of Social and Health Services, State of Washington claims a lien upon ANY AND ALL OF THE REAL AND PERSONAL PROPERTY of the above named debtor situated in SKAMANIA County, Washington.

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

State of Washington

Authorized Representative Phone: (360) 753-1325 1-800-562-6114 (Washington Toll Free)

County of Thurston

I certify that 2 is a

1425.1 appeared before me, and signed this instrument as a DSHS urposes mentioned in this document

NOTARY PUBLIC State of Washington

Abusamhas

Notary Public in and for the State of Washington SHIRLEY A. FINN

Dated: June 19, 1997

NOTICE AND STATEMENT OF COMPTRISSION EXPIRES Dec 27, 1999

DSHS 12-XXX (12/1996)

My appointment expires: 12-27-99