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Page 1 of 1
Date: 07/23/2007 02:39P
Filed by: DEPT OF SOCIAL AND HEALTH SVC
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$40.00



RETURN TO:

Department of Social and Health Services
Financial Services Administration
Office of Financial Recovery
PO Box 9501
Olympia WA 98507-9501

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: GLORIA A HARTMAN, also known as or
doing business as: _____

DOB: 01/11/1947 SSN: XXX-XX-7050

Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery
Legal Description: LOT 2 HARTMAN SP BK T/PG 45- AKA: 1551 SW LAKEVIEW RD

Assessor's Property Tax Parcel Account Number: 02070210050400

NOTICE IS GIVEN THERE IS debt owed to the State of Washington and the State of Washington files this lien in accordance with the provisions of RCW 43.20B.080 and .090. The Office of Financial Recovery files a lien for an undetermined amount in SKAMANIA County on:

- ☐ All real and personal property of the debtor named above.
☒ Only the property described in the Legal Description section above.

Estate Recovery Program

Contact
1-800-562-6114

Telephone Number

Shannon Kenelty

Authorized Representative
Department of Social and Health Services

07/20/2007

Date

In reply, refer to:

Case# **050198899** ER

DSHS: 09-019A (06/2003)
2 of 2

