Skamania County, WA Total:\$39.00

Total:\$39.00 LIENCITY Pgs=1 2022-000925 05/03/2022 08:23 AM

Request of: DEPARTMENT OF SOCIAL AND HEALTH

0001294920220009250010011



RETURN TO:
DEPARTMENT OF SOCIAL AND HEALTH SERVICES (DSHS)
ECONOMIC SERVICES ADMINISTRATION (ESA)
OFFICE OF FINANCIAL RECOVERY – ESTATE RECOVERY (OFR)
PO BOX 9501
OLYMPIA WA 98507-9501

NO	tice and Statemen	t of Lien (Esta	te Recove	∌ry)
Grantor or Debtor: DA	NIEL E BLOUIN SR			_, also known as (aka) or
doing business as (dba):,				
	Birth date: 03/0	3/1936	SSN: XX	X-XX-3344
Grantee or Creditor: DSHS, Economic Services Administration (ESA), Office of Financial Re				ncial Recovery (OFR)
Logal Bosonplion.	escription: Legal Description: 90-010105 Township-Range-Sect: 03-08-29 County: SKAMANIA, WA			
Assessor's Property Tax Parcel Account Number: 03082900010000				
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 & 41.05A.090. The DSHS 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		Debbie Chase		
CONTACT 1-800-562-6114		AUTHORIZED REPRESENTATIVE DEPARTMENT OF SOCIAL AND HEALTH SERVICES		
		DEPAR IMENT OF	DEFARTIVIENT OF SOCIAL AND HEALTH SERVICES	
TELEPHONE NUMBER		04/25/2022		
In reply, refer to:		Date		
Case Number: 0518	339489 ER			

NOTICE AND STATEMENT OF LIEN (ESTATE RECOVERY) DSHS 09-019A (Rev. 04/2014)