Skamania County, WA Total:\$18.00 LIENCITY Pgs=1

2023-001256

09/05/2023 12:42 PM

Request of DEPARTMENT OF SOCIAL AND HEALTH







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

Notice and Statement of Lien

Grantor or Debtor:	WEBER, GE	ERRI A.	₩	, also known as (aka) or	
doing business as (dba)					
Birth date: 10/1	<u>5/1960</u> SSN: XX	X-XX-0139		()	
Grantee or Creditor: DSHS	6, Economic Servic	ces Administra	ation(ESA), Office of I	Financial Recovery(OFR)	
Legal Description:			. ()		
Assessor's Property Tax	x Parcel Accoun	t Number:		, ,	
NOTICE IS GIVEN THERI in accordance with the pro Recovery files a lien in the	ovisions of RCW 7 a amount of \$1,929	4.04.300 and 9.70 in SKAM	/or RCW 43.20B.620. IANIA County on:	tate of Washington files this lien The DSHS Office of Financial	
Only the property de	escribed in the L	egal Descrip	ption section above.		
VENDOR RECOVERY	PROGRAM	Dani M	1aruyama		
PROGRAM			REVENUE AGENT / AUTHORIZED REPRESENTATIVE DEPARTMENT OF SOCIAL AND HEALTH SERVICES		
1-800-562-6114 ext 45455		08/31/2	08/31/2023		
TELEPHONE NUMBER		DATE	DATE		
In reply, refer to:	1216E0201VD				