



RETURN TO:

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



200208050014
Skagit County Auditor

8/5/2002 Page 1 of 1 9:27AM

**NOTICE AND STATEMENT OF LIEN
ESTATE RECOVERY**

GRANTOR/DEBTOR: **BELLES, EUNICE J**

CASE NUMBER: 002905752

GRANTEE/CREDITOR: DSHS, Finance Division, Office of Financial Recovery

LEGAL DESCRIPTION:

EUNICE J BELLES INTEREST IN: THAT PART OF THE NORTHEAST QUARTER (NE1/4) OF THE NORTHWEST QUARTER (NW1/4) OF SECTION TWENTY-FOUR (24), TOWNSHIP THIRTY-FIVE (35) NORTH, RANGE FOUR (4) EAST OF THE WILLAMETTE MERIDIAN, LYING WEST OF THE NORTHERN PACIFIC RAILWAY RIGHT OF WAY, AND SOUTH OF THE PUGET SOUND & BAKER RIVER RAILWAY RIGHT OF WAY, EXCEPT ROAD AND DITCH RIGHTS OF WAY.

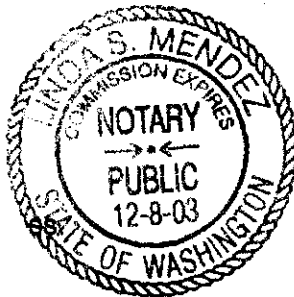
ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(S): **P90024**

NOTICE IS HEREBY GIVEN THAT the State of Washington, Department of Social and Health Services, hereby asserts a lien for the amount of medical assistance or state funded long-term care, or both, paid on behalf of EUNICE J BELLES, a deceased person. The said department asserts this lien under the authority of RCW 43.20B.080 and .090, against the estate of the above named deceased person, and in particular against the above-described real property located in SKAGIT County, Washington

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Peggy J De Miero

Peggy J De Miero, AUTHORIZED REPRESENTATIVE
(360) 664-5700 (Olympia)
1-800-562-6114 (Toll Free)



State of Washington

County of Thurston

I certify that Peggy J De Miero appeared before me, and signed this instrument as a DSHS officer and as his/her free and voluntary act for the purposes mentioned in this document.

Dated: 8/1/2002

Linda S Mendez

Notary Public in and for the State of Washington

My appointment expires: 12-8-03