



200708230021

Skagit County Auditor

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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: LIZZIE REINARD, also known as or
doing business as: _____

DOB: 05/11/1915 SSN: XXX-XX-8760

Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery

Legal Description: MCMURRAY LTS 8 TO 10 & NELY OF R/W 11-14-22 & 23 BLOCK 20. TOGETHER WITH THAT PORTION OF THE SOUTH 1/2 OF UNOPENED ARCADE STREET LYING NORTH OF AND ADJACENT TO LOT 8, BLOCK 20. AKA: 22920 FRONT STREET

Assessor's Property Tax Parcel Account Number: P75150

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 (8) and .090. The Office of Financial Recovery files a lien for an undetermined amount in SKAGIT 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

Eric Tompkins
Authorized Representative
Department of Social and Health Services
08/22/2007
Date

In reply, refer to:
Case# **002774147 ER (TEFRA)**

