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1 8:47AM



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:	tor: SHIRLEY A LATTING			, also known as or
doing business as:				1
	DOB: 03/28/1947	SSN:	XXX-XX-7423	
Grantee or Creditor:	DSHS, Financial Services Ad	ministration,	Office of Finance	cial Recovery
Legal Description:	(0.4300 ac) TOWNSITE 2ND TO HAMILTON LOTS 1 TO 7 BLK 31			
Assessor's Property	y Tax Parcel Account Number:	P73 7 48	<u> </u>	· .
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 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 Pr	rogram	Kenneth Wa	ashington	} ^
Contact		Authorized	Representative	47
1-800-562-6114		Department of Social and Health Services		
Telephone Number		04/20/2010		
		Date		
In reply, refer to:				
Case# 0512964 1	IO ER 000	0051296	410ER230	02

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