



201107180011

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: VIRGINIA HINZE, also known as or
doing business as: _____

DOB: 03/10/1943 SSN: XXX-XX-2363

Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery
Legal Description: (TITLE ELIMINATION) INCLUDING MANUFACTURED HOME 1994 LIBERTY OAKHURST 48X28
SERIAL NUMBER 09L28635XU CEDARGROVE ON THE SKAGIT LOT 208

Assessor's Property Tax Parcel Account Number: P64290

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 Program

Contact

1-800-562-6114

Telephone Number

In reply, refer to:

Case# **004519807 ER**

Erik Kjesbu

Authorized Representative

Department of Social and Health Services

07/13/2011

Date

000004519807ER2302

