



201203120001

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: NICK VLAHOVICH, also known as or
doing business as: _____

DOB: 12/06/1917 SSN: XXX-XX-5804

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

Legal Description: THUNDERBIRD TO MT VERNON LOT 49
TWNSHP-RNG-SECT: 34-4E-21

Assessor's Property Tax Parcel Account Number: P54517

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# **051579257** ER

Mary Robinson

Authorized Representative

Department of Social and Health Services

03/07/2012

Date

000051579257ER2302

