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Skagit County Auditor
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Department of Social & Health Services
FSA Financial Services Administration

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: DEBRA L MATTESON , also known as or

doing business as: ,

DOB: 03/29/1951 SSN: XXX-XX-1640

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

Legal Description: LOT 20 AND THE SOUTH 20 FEET OF LOT 19, BLOCK N, TOWN OF LA CONNER, ACCORDING TO THE PLAT, THEREOF RECORDED IN VOLUME 3 OF PLATS, PAGE 49, RECORDS OF SKAGIT COUNTY WASHINGTON.
Township 34; Range2E; Section 36

Assessor's Property Tax Parcel Account Number: P74028

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# **051811623** ER

Lynn Larsen
Authorized Representative
Department of Social and Health Services
07/16/2012
Date

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