



201402140015

Skagit County Auditor

\$32.00

2/14/2014 Page

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1 8:35AM



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: JULIA M PAUL, also known as or

doing business as:

DOB: 05/17/1920

SSN: XXX-XX-2223

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

Legal Description: BAY HILL VILLAGE DIV 1, LOT 15
CENSUS TRACT/BLK: 9519.00/2
TWNSHP-RNG-SECT: 34-3E-02

Assessor's Property Tax Parcel Account Number: P95846

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 & 41.05A.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# **004091697** ER

Mary Robinson

Authorized Representative

Department of Social and Health Services

02/10/2014

Date

000004091697ER2302

