

Skagit County Auditor

\$33.00

5/27/2016 Page

1 of

110:09AM



RETURN TO: DEPARTMENT OF SOCIAL AND HEALTH SERVICES (DSHS)
ECONOMIC SERVICES ADMINISTRATION (ESA)
OFFICE OF FINANCIAL RECOVERY ESTATE RECOVERY (OFR)
PO BOX 9501 OLYMPIA WA 98507-9501

No:	tice and State	ment of Lien (Est	ate Rec	cove ry)	
Grantor or Debtor: HE	NRY L DAVIS 🦴			, also known as (aka) or	
doing business as (dba):					
·	Birth date:	11/03/1927	SSN:	XXX-XX-3582	
Grantee or Creditor: D	SHS, Economic Ser	vices Administration (ESA	.), Office of	Financial Recovery (OFR)	
Legal Description:	AUK RIVER ESTATES S	SUB-DIV 2 1/57 (NT TRS H THE	U L ALL LOT	T 35 Q02 S19 T34 R10	
Assessor's Property Ta	ax Parcel Accoun	t Number: P68967	Name of the last o		
	ance with the prov	visions of RCW 43.20E	3.080 & 41	nd the State of Washington 1.05A.090. The DSHS Office T County on:	
All real and person	al property of the	debtor named above.	Samuel Market Barrier		
X Only the property of	described in the L	egal Description section	on above.	Photography (Photography)	
Estate Recovery Progr	Lisa Ellis				
CONTACT			AUTHORIZED REPRESENTATIVE DEPARTMENT OF SOCIAL AND HEALTH SERVICES		
1-800-562-6114		DEPARIMENT	OF SOCIAL	AND HEALTH SERVICES	
TELEPHONE NUMBER		05/25/2016			
In reply, refer to:		Date			
Case Number: 0525	29991 ER				
NOTICE AND STATEMENT OF LIEN (ESTATE RECOVERY) DSHS 09-019A (Rev. 04/2014)		111 MAT NO 31 CO M 1 2 10 1	# 18 E W 10 0 1E) 0	2 00	