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05/01/2023 10:39 AM Pages: 1 of 1 Fees: \$39.00 Skagit County Auditor



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

Notice and Statement of Lien (Estate Recovery)

Grantor or Debtor:	MARY E	, also known as (aka) or				
doing business as (dba):,						
		Birth date:	03/07/1948	SSN:	XXX-XX-1232	
Grantee or Creditor:	DSHS	DSHS, Economic Services Administration (ESA), Office of Financial Recovery (OFR)				
Legal Description:	EXT T 34 NO County Censu Towns	Legal Description: (0.2000 AC) TAX 120 BEG ON S LI SEC ST 108FT W OF W LI OF 6TH ST EXT TH W ALG S LI SEC ST 58FT TH S 150FT E 58FT N 150FT TPB, SECTION 29, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M. County: SKAGIT, WA APN: P28416 Census Tract / Block: 9524.01 / 3 Alternate APN: 34042902360009 Township-Range-Sect: 34-4E-29 Map Reference: 34N-04E-29-NW / 04E-34N-29-				
Assessor's Property Tax Parcel Account Number: P28416 ALT APN:34042902360009						
files this lien in acc	ordance	with the pro	d to the State of Washi visions of RCW 43.20B. undetermined amount in	080 & 4	nd the State of Washington 1.05A.090. The DSHS Office IT County on:	
All real and per	rsonal p	roperty of the	debtor named above.			
X Only the property described in the Legal Description section above.						
Estate Recovery Program			Melinda Rice	Melinda Rice Direct line 360-819-7729 Melinda.Rice@dshs.wa.gov		
CONTACT			AUTHORIZED REPRESENTATIVE			
1-800-562-6114			DEPARTMENT O	F SOCIAL	. AND HEALTH SERVICES	
TELEPHONE NUMBER			04/27/2023	04/27/2023		
In reply, refer to:			Date	Date		
Case Number: 0	5260318	34 ER				

NOTICE AND STATEMENT OF LIEN (ESTATE RECOVERY)
DSHS 09-019A (Rev. 04/2014)

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