



200412010034

Skagit County Auditor

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RETURN RECORDING INFORMATION 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: MELOM, MARNE, also known as or
doing business as: _____

SSN: XXX-XX-9998 DOB: _____ UBI#: _____

Grantee or Creditor: DSHS, Financial Services Administration, Office of Financial Recovery
Legal Description: SYNDICATE ADD TO LA CONNER BLK 17 TAX 10 BEG AT NW COR OF LOT 6 BLK 17 SYNDICATE ADD TO LA CONNER TH N PARL WITH W LINE OF MAPLE AVE IN SD ADD TO THE S LINE OF WASH. AVE TH W'LY ALG S LINE OF SD AVE TO THE NW COR OF LOT 12 IN BLK 17 TH S'LY ALG THE W'LY BDY LINE OF SD LOT 12 TO THE SW COR THEREOF TH SELY TO BEG BEING PART OF LOTS 11 & 12 AND ALL LT 13

Assessor's Property Tax Parcel Account Number: P74378

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

PEGGY J DeMIERO
Authorized Representative
Department of Social and Health Services
11/24/2004
Date

In reply, refer to:
Case# 002781400 ER