201810180009

10/18/2018 09:13 AM Pages: 1 of 1 Fees: \$37.00 Skapit 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)

		Helit Of Fiell (Fate	re iver	• ,
Grantor or Debtor:	WILLIAM H OFFLEY			, also known as (aka) or
doing business as	(dba):			
	Birth date:	03/27/1935	SSN:	XXX-XX-9967
Grantee or Creditor:	DSHS, Economic Serv	rices Administration (ESA),	Office of	Financial Recovery (OFR)
Legal Description:		IATION) INCLUDING MANUFAC EL NUMBER T1152 EAGLE VAL		OME 1997 PALMHARBOR 44X27 SERIAL LOT
Assessor's Proper	ty Tax Parcel Account	Number: P106939		
files this lien in acc	ordance with the provi		080 & 4	nd the State of Washington 1.05A.090. The DSHS Office IT County on:
All real and pe	rsonal property of the	debtor named above.		
X Only the prope	erty described in the Le	gal Description section	above.	
Estate Recovery P	rogram	Lynn Larsen		
CONTACT		AUTHORIZED RE		
1-800-562-6114		DEPARIMENTO	- SOCIAL	AND HEALTH SERVICES
TELEPHONE NUMBER	₹	10/12/2018		
In reply, refer to:		Date		
Case Number: 0	02284345 ER			
		:=4;==;==:==:=====		

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

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