

98 Dec -3 P2:05

OMB Control #: 0970-0153

NOTICE OF LIEN

OBLIGOR:

Anthony L Daugherty
Name

537-88-0072
Social Security Number

TONY DAUGHERTY
Alias

Alias Social Security Number

Alias

Alias Social Security Number

07/11/68
Date of Birth

OBLIGEE:

Danielle R Daugherty
Name

TO: **KLAMATH COUNTY CLERK**
305 MAIN ST

KLAMATH FALLS OR 97601

FROM (Claimant): **WASHINGTON STATE DIVISION OF CHILD SUPPORT**

G Wilson
500 First Avenue S
MS: N17-28
Seattle Wa 98104-2830
(206) 341-7000
Fax: 206 389-2477

Claimant's Case #: **864351**

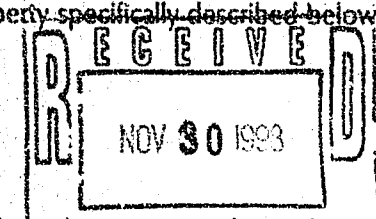
This lien results from a child support order, entered on 12/01/95
by SUPERIOR COURT OF WASHINGTON in WASHINGTON/PIERCE
docket number 94-3-01951-1. This order requires the above-named obligor to pay child support
in the amount of \$ 398.41 per Monthly

As of 10/31/98, the obligor owes unpaid support in the amount of \$ 7433.85 and this
lien amount is subject to an interest rate of _____

Prospective amounts of child support, not paid when due, are judgments and accrue to the lien amount. This lien
attaches to all non-exempt real and personal property of the above-named obligor, which is located or recorded
within the state/county/other subdivision of the state of filing, including any property specifically described below.

Specific description of property:

AGAINST PROCEEDS IN FAVOR OF THE ABOVE-NAMED DEBTOR
RESULTING FROM SETTLEMENT(S) IN THE STATE OF OREGON.



The priority and enforcement of this lien are governed by the law of the state where the property is located. An
obligor must follow the laws and procedures of the state where the property is located or recorded to contest or
challenge this lien. This lien remains in effect until released by the claimant or in accordance with the laws of the state
of filing.

For use by lien recorder

NOTE TO LIEN RECORDER: Please provide the claimant with a copy of the filed lien, containing the recording information at the address provided on page 1.

Check either "A" or "B":

A. ☒ Issued by a IV-D agency/office

As an authorized agent of a state, or subdivision of a state, responsible for implementing the child support enforcement program set forth in Title IV, Part D, of the Federal Social Security Act (42 U.S.C. 651 et seq.), I have authority to file this child support lien in any state, or U.S. Territory. For additional information regarding this lien, including the pay-off amount, please contact the authorized agency (claimant) at the address provided on page 1. Please reference the case number, also provided on page 1.

October 23, 1998

Date

Authorized Agent

B. ☐ Issued by a private (non-IV-D) attorney

I am an attorney representing the obligee named on page 1. I certify that this lien is issued in accordance with the laws of the state of Washington. For additional information regarding this lien, including the pay-off amount, please contact the undersigned (claimant) at the address provided on page 1.

Date

Attorney for Obligor

State of Washington

County of

I certify that G Wilson

appeared before me and is known to me as the

individual who signed the above

Date

Notary Public

My appointment expires

Notice: Respondents are not required to respond to this information collection unless it displays a valid OMB control number. The average burden for responding to this information collection is estimated at 30 minutes. If you believe this estimate is inaccurate, or if you have ideas to reduce this burden, please provide comment to the issuing agency.

DSHS 09-002 (11/1997)

NOTICE OF LIEN 2 of 2

(FG REL 02/1988)
(2224.881023-1206181)

STATE OF OREGON: COUNTY OF KLAMATH: 88.

Filed for record at request of Washington State Child Support the 3rd day of December A.D., 19 98 at 2:05 o'clock P. M. and duly recorded in Vol. M98 of County Lien Docket on Page 44222

FEE \$5.00

By Bernetha G. Letsch, County Clerk
Kathleen B. B...