FILED FOR RECORD SKAMANIA CO. WASH BY DS HS

Jan 8 4 36 PH '97

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AUDITOR

GARY M. OLSON

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DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98662-0269



STATE OF WASHINGTON

DEPARTMENT OF SO DIVISION OF	OCIAL AND HEALTH SERVICES CHILD SUPPORT (DCS)
	STATEMENT OF LIEN
Grantor or Debtor: Michael D. Vanderveg DOB 08/12/48	t , SSN
Grantee or Creditor: The Department of Social	and Health Services (DSHS),
Legal Description:	
Assessor's Property Tax Parcel Account Numbe	
DSHS claims that the debtor named above owe Support (DCS) files a lien in the amount of \$	s past-due child support. The Division of Child 4,588.75 in Skamania County on:
All real and personal property of the debtor	
Only the property described in the Legal De	escription section above.
	~ () /
January 06, 1997 Date	î., Canonica
Date	Authorized Representative DIVISION OF CHILD SUFPORT
	(360) 696-6391
in reply, reser to:	Telephone Number

Case #: 887202

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. (19/1996)

(FG REL:12/96) (0865:970106:180602) 887202/0865

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