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FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

APR 7 4 49 PH '97

SAUDITOR

GARY M. OLSON

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



NOTICE AND STATEMENT OF LIEN DSH5 09-282 (REV. 09/1996)

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN	
Grantor or Debtor Pochelle M. Walker DOB 09/10/65	, SSN,
Grantee or Creditor: The Department of Social and Health Services (DSHS),	
Legal Description:	
Assessor's Property Tax Parcel Account Number:	
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 1,495.00 in Skamania County on:
All real and personal property of the debtor	named above except Tribal Trust property.
Only the property described in the Legal Description section above,	
March 31, 1997 Date	J. Demich Authorized Representative
	DIVISION OF CHILD SUPPORT
	(360) 696-6391
la ranki katau ta	Telephone Number
In reply, refer to: Case #: 847604	

(FG REL:12/96) (3520:970331:180704) 847604/3520