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FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

May 12 1 23 PM '97

OSWAY

AUDITOR

GAR M. OLSON

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



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

NOTICE	AND STATEMENT OF LIE	N
Grantor or Debtor: Shawn P. Shold DOB 05/16/70	debrand	, SSN,
Grantee or Creditor: The Department	of Social and Health Services (DSI IS).
Legal Description:		
Assessor's Property Tax Parcel Account	Number:	
DSHS claims that the debtor named ab Support (DCS) files a lien in the amount	ove owes past-due child support. It of \$ 9,983.64 in Skan	
All real and personal property of th	e debtor named above except Triba	Trust property
Only the property described in the		
	g	
May 08, 1997	P. Taf¢	
Date	Authorized Representative ENVISION OF CHILD SUPPOR	
	(360) 696-6391	
	Telephone Number	
In reply, refer to:		
Case #: 605991		
NOTICE AND STATEMENT OF SIEN DSHS 09-282 (REV. 19/1996)		(FG REL:12/96) (1376:976-308:180738) 605991/1316
		Empresa de la composição
		Endexed, Dir