

BOOK 165 PAGE 379

MAY 19 4 53 PM '97

P. Emory
AUDITOR
GARY M. OLSON



NOTICE AND STATEMENT OF LIEN

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 owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 8,167.38 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.

May 13, 1997
Date

B. Montgomery
Authorized Representative
DIVISION OF CHILD SUPPORT

(360) 696-6391
Telephone Number

In reply, refer to:
Case #: 721263

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

(FG REL:12/98)
(2768:970513:180816)
721263/2766

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