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FILED FOR RECORD SKAMAN 4 GO. WASH BY DEAS

OCT 15 2 38 PN '97

MMOSCIE

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLD: 3 F O BOX 4259 VANCOUVER WA 98562-0269



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

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Michael R. Taylor DOB 09/23/55	S	5N
Grantee or Creditor: The Department of So	cial and Health Services (DSHS).	
Legal Description:		1
Assessor's Property Tax Parcel Account Num	ber:	
DSHS claims that the debtor named above support (DCS) files a lien in the amount of	3,097.25 in Skaman	County on:
All real and personal property of the del	otor named above except Iribal In	ist property.
Only the property described in the Lega	l Description section above.	
		MACKEU, FAT
October 13, 1997	K. Fisher	neiree.
Date	Authorized Representative DIVIS. ON OF CHILD SUPPORT	Funcia Model
	(800) 345-9984	
	Telephone Number	age and a surprise of the first of the factor of the facto
In reply, refer to: Case #. #45428		
NOTICE AND STATEME IT OF LIEN		.FG REL:12/96) (0824:971013:182049) 845428/0824