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FILED FOR RECORD SKAMANIA CO. WASH BY DS. HS

Nov 4 9 18 AH '97 O Caury AUDITORY GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN 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 LIEN	
Grantor or Debtor. Allen M. Tee1 DOB 08/23/59	, SSN
Grantee or Creditor: The Department of Social	and Health Services THS).
Legal Description:	
	edexed, Dir
Assessor's Property Tax Parcel Account Number	
DSH5 claims that the debtor named above owe Support (DCS) files a lien in the amount of \$	es past-due child support. The Division of Child 4,509.04 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 D.	escription section above.
October 29, 1997	K. Fisher
Date	Authorized Representative DIVISION OF CHILD SUPPORT
	(800) 345-9984
	Telephone Number
In reply, refer to: Case #: 135182 501317	
Case #: 135182 501317	501316 392737
NOTICE AND STATEMENT OF LIEN DSHS (19-282 (REV. 09/1996)	(FG RGL12/96) (0824:871020:100908) 135182/0824