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FILED FOR RECORD
SKAMANIA CO. WASH
BY .. DSHS ..

Nov 7 3 22 PM '97

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AUDITOR
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: Robert A. Shaver, SSN [REDACTED]
DOB 01/11/59

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 \$ 680.00 in Skamania County on:

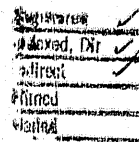
☒ All real and personal property of the debtor named above except Tribal Trust property.

☐ Only the property described in the Legal Description section above.

November 05, 1997
Date

P. Taiff
Authorized Representative
DIVISION OF CHILD SUPPORT

(800) 345-9984
Telephone Number



In reply, refer to:
Case #: 914077

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

(FG REL:12/96)
(1310:971105:102&40)
914077/1316