FILED FOR RECORD
SKAMAN: A CO. WASH
BY DSHS

DEC 4 447 PH '97

CARY 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: David A. DOB 01/	the first of the Control of the Cont	, SSN <u>533-64-2695</u> ,
Grantee or Creditor: The Dep	artment of Social and Health S	ervices (DSHS),
Legal Description:		
Assessor's Property Tax Parcel	Account Number:	-0
DSHS claims that the debtor n Support (DCS) files a lien in th	amed above owes past-due che amount of \$ _ 2,356.05	ild support. The Division of Child in Skamania County on:
All real and personal prope	rty of the debtor named abov	e except Tribal Trust property.
☐ Only the property describe	ed in the Legal Description sec	tion above.
		Bag Miss
December 02, 1997 Date		Representative F CHILD SUPPORT SIGNATURE TO SUPPORT
	(800) 34	15-9984
	Telephone N	lumber
In reply, refer to: Case #: 740826	947387	
NOTICE AND TATEMENT OF LIEN DSH5 09-282 (REV. 09/1996)		(FG REL:12/98) (1580:971202:180650) 740828/1580