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FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

MAR 17 2 30 PM '98
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

DOB 04/22/53	idis	SSN 042-84-0505
Grantee or Creditor: The Department of Soc	—' ial and Health Services (DS: 'S)	4
Logal Description:		ALL THE PROPERTY AND ADDRESS OF THE PARTY AND
		The second second second
Assessor's Property Tax Parcel Account Numb	er:	Section of the sectio
DSHS claims that the debtor named above ow Support (DCS) files a lien in the amount of \$	ves past-due child support. The 18,223.00 in Skame	ne Division of Child
All real and personal property of the debte	or named above except Tribal	
Only the property described in the Legal D		
	Alegia:	
March 15, 1998	K. Fisher	
Date .	Authorized Representative DIVISION OF CHILD SUPPORT	
	(800) 345-9984	
	Telephone Number	
n reply, refer to: Case #: 1125010		
OTICE AND STATEMENT OF LIEN SHS 09-202 (REV. 09/1996)		(FG REL:12/98) (0824:980315:071907) 1125010/0824