FILED FOR MEGORD SKAMANIA CO. WASH BY DSHS

May 13 4 35 PM '98

OXOWY

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98652-0269



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIV'SION OF CHILD SUPPORT (DCS)

## NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Kaye L. Jones DOB		, SSN <u>534-46-3726</u>
Grantee or Creditor: The Department of S	ocial and Health Services (DSHS)	
Legal Description:		
Assessor's Property Tax Parcel Account Num	iber:	13
		Division of Child
All real and personal property of the det	The second secon	County on:
Only the property described in the Legal	Description section above.	rust property,
May 06, 1998 Date	H. Hughes Authorized Representative DIVISION OF CHILD SUPPORT	Supplement of the supplement o
	(800) 345-9984	A to tell
In reply, rr fer to: Case #: 1267617	Telephone Number	Andread Control of the Control of th
NOTICE AND STATEMENT OF LIEN DSHS U9-282 (REV. U9/1998)		(FG REL:12/99) (2781:980506:181150) 1287617/2781