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DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN RLDG 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

| 110 11 21 7 21 7   | O DESCRIPTION CALLS                                    | -  |
|--|--|--|
| Grantor or Debtor: Kristi J. Reed  | s  | SSN 539-64-6695  |
| DOB 02/03/63   |  | And the forest continue description of the second s |
| Grantee or Creditor: The Department of So  | cial and Health Services (DSHS).                       |  |
| Legal Description:   |  | - 1  |
|  |  |  |
|  |  |  |
| Assessor's Property Tax Parcel Account Num   | ber:   | ) )  |
| DSHS claims that the debtor named above of Support (DCS) files a lien in the amount of S | owes past-due child support. The 200.00 in Skaman.     | Division of Child ia County on:  |
| All real and personal property of the deb  | otor named above except Tribal Tru                     | ust property.  |
| Only the property described in the Legal   | Description section above.                             |  |
|  |  | Edition in   |
|  |  | ndexed, Di   |
| May 19, \998   | J. Cram  | produce the finances of the second   |
| Date   | Authorized Representative<br>DIVISION OF CHILD SUPPORT | 1866   |
|  | DIVIDION OF CHIED BOTFORT                              | CAL PROPERTY OF THE PARTY OF   |
|  | (800) 345-9984   |  |
|  | Telephone Number                                       |  |
| In reply, refer to:  |  |  |
| Case #: 1348356  |  |  |
| NOTICE AND STATEMENT OF LIEN<br>DSHS 09-282 (REV. 09/1996)                               |  | (FG REL:12/86)<br>(3404:880519:181935)<br>1348356/3404   |