FILED FOR HEGORD SKAMAR GO WASH BY DS HS

Jun 12 4 ge PH '98

OXOUNG

AUGITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 F 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: Mary E. Walker DOB 10/24/59	, SSN <u>538-70-3253</u>
Grantee or Creditor: The Department of Social	and Health Services (DSHS).
Legal Description:	1, 4
Assessor's Property Tax Parcel Account Number:	~ 1)
DSHS claims that the debtor named above owes Support (DCS) files a lien in the amount of \$	in Skamar ia County on
Only the property described in the Legal Des	cription section above
<u>June 07, 1998</u>	Sold Walter
Date	J. Deminh Authorized Representative DIVISION OF CHILD SUPPORT
	(800) 345-9984
n reply, refer to: Case #: 830008	Telephone Number
IOTICE AND STATEMENT OF LIEN ISAIS 09-282 (REV. 09/1996)	(FG REL:12/86) (3520,980807:023711) 830008/3520