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FILL IN RECORD
SKAMANIA CO. WASH
BY DSHS

Nov 4 9 27 AM '99

D. Lawry
AUSTOR
GARY M. OLSONDIVISION OF CHILD SUPPORT
5411 F MILL PLAIN BLDG 3
P O BOX 4269
VANCOUVER WA 98662-0269STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Barbara L. Jackson, also known as or
doing business as: _____SSN 575-86-9693, DOB 11/01/56

Grantee or Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

Reviewed
Indexed
Filed
Mailed

Assessor's Property Tax Parcel Account Number: _____

DSHS claims that the debtor named above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 4,076.71 in Skamania County on:☒ All real and personal property of the debtor named above except Tribal Trust property.☐ Only the property described in the Legal Description section above.November 01, 1999
DateB. Munoz Erwin
Authorized Representative
DIVISION OF CHILD SUPPORT(360) 696-4391
Telephone NumberB. Munoz Erwin
Person to Contact

In reply, refer to:

Case #: 10213181459936NOTICE AND STATEMENT OF LIEN
DSHS 09-282 (REV. 04/1997)(FG REL-06/1999)
(2133-9911/11031422)
1021318/2133