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SKAMANIA CO. WASH
BY DSHS

Oct 6 4 28 PM '00

G. M. Olson
AUDITOR
GARY M. OLSON

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

also known as or

SSN 519-92-0705, DOB 04/24/61

Claimant's Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

[illegible]

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 \$ 66,369.09 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.

October 03, 2000
Date

J. Demich
Authorized Representative
DIVISION OF CHILD SUPPORT

(360) 696-6100
Telephone Number

J. Demich
Person to Contact

In reply, refer to:

Case #: 385234

828492

NOTICE AND STATEMENT OF LIEN
DSHS 09-0001 REV. (04/1997)

(FG REL:06/1999)
(3520:001003:051500)
385234/3520