## 500x 204 PAGE 935

FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

DEG 5 3 OI PN '00

CAUPY

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 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

| Grantor or Debtor: <u>Joseph E. Sta</u> doing business as:                      | , also known as or   |
|---|--|
| SSN <u>536-66-772</u>   | 9 , DOB 08/08/66   |
| Grantee or Creditor: The Department   | of Social and Health Services (DSHS).  |
| Legal Descript∤on:  | Services (Services (Servic |
| Assessor's Piroperty Tax Parce! Account   | Number:  |
| DSHS claims that the debtor named ab<br>Support (DCS) files a lien in the amour | ove owes past-due child support. The Division of Child it of \$ 10,275.00 in Skamania County on:   |
| All real and personal property of th  | e debtor named above except Tribal Trust property.   |
| Only the property described in the  |  |
| December 01, 2000<br>Date   | J. Demich Authorized Representative DIVISION OF CHILD SUPPORT  |
| (360) 696-6100  | J. Demich  |
| Telephone Number  | Person to Contact  |
| In reply, refer to:<br>Case #: 1141242  |  |
| NOTICE AND STATEMENT OF LIEN<br>DSHS 09-282 (REV. 04/1997)                      | ( <u>FG REL:08/1989)</u>   |

(FG REL:08/1999) (3520:001201:033731) 1141242/3520