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AUG 2 JOB PM 10 CAWAY GARY M. OLSON

> (FG REL:06/1969) (1155:010728:094250) 1543065/1155

DIMISION OF CHILD SUPPORT 5411 E NILL PLAIM BLDG 3 PC NOX 4269 VANCOUVER WA 98682-0099



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

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: doing business as:	William J. West , also known as or		
	SN <u>540-96-6464</u> , D	CB 11/13/63 .	
Grantee or Creditor:	The Department of Social ;	and Health Services (DSHS)	. Singulation of
Legal Description:			ladered (Ar /
			VWOS PACE
			Witned Walled
All real and person	an me amount or \$	past-due child support. The second in Skane in S	County on:
July 20, 2601	D	Opoka	
Date	Au	nthorized Representative VISION OF CHILD SUPPORT	
(360) 696-6100	D.	Opoka	
Telephone Number	Pei	rson to Contact	Addressed the Control of the Control
In reply, refer to: Case #: 1543	065		
MOTICE AND STATEMENT OF LIEN DSH6 09-282 (REV. 04/1997)			(FG REL:08/1900)