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FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

MAR 20 2 08 PM '02

AUDITOR

J. MICHAEL GARVISON

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Advised the

DIVISION OF CHILD SUPPORT 1002 N 16TH AVENUE PO HOX 22510 YARIMA WA 98907-2510



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

/\ <b>I</b> /!	DIVISION (	OF CHILD SUPPORT (DCS)	3
		D STATEMENT OF LIE	
Grantor or Debtor: doing business as:			also known as or
	SSN 537-98-1945	, DOE 04/16/70 .	7
Grantee or Creditor	: The Department of So	cial and Health Services (DSHS)	
Legal Description:			
	_(()		
Assessor's Property	Tax Parcel Account Num	ber:	
DSHS claims that the Support (DCS) files	e debtor named above o a lien in the amount of \$	wes past-due child support. Th	e Division of Child
manual Common Co		tor named above except Tribal	The same of the sa
		Description section above.	nost property.
March 13, 2002		A. Valadez	
Date		Authorized Representative DIMISION OF CHILD SUPPORT	
(509) 249-6000		A. Veladez	
Telephone Number		Person to Contact	
in reply, refer to: Case #: 10	18467		
OTICE AND STATEMENT OF LIE			
SHS 09-282 (REV. 04/1997)			(FG NEL:06/1969) (3198:020313;214337) 1018487/3198
			101070//3188