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FILED FOR RECORD
SKAMANIA CO. WASH
BY DSHS

MAR 27 2 22 PM '03

J. MICHAEL GARRISON

ANOTHER

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DIVISION OF CHILD SUPPORT

PO BOX 11520
TACOMA WA 98411-5520STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Aaron B. Fallin, also known as or
doing business as: _____SSN 554-51-0692 DOB 03/22/77

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

Legal Description:

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 \$ 5,684.00 in Skamania County on:

All real and personal property of the debtor named above except Trib¹ Trust property.

Only the property described in the Legal Description section above.

March 25, 2003

Date

A. Cullen
Authorized Representative
DIVISION OF CHILD SUPPORT

(360) 696-6100

Telephone Number

A. Cullen
Person to Contact

In reply, refer to:

Case #: 1522722NOTICE AND STATEMENT OF LIEN
DSHS 09-282 (REV. 04/1997)(FG REL:06/1990)
(3083-030325;232258)
1522722/3083