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FILED FOR PLEORD SKAMA DSHS BY DSHS MAY 8 2 12 PN '03 CAMOSER J. MICHAEL GARVISON

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 98411-5520



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

NOTICE AND STATEMENT OF LIEN

doing business as:	, also known as o	r
SSN <u>532-76-</u>	3230 , DOB 07/05/63	
Grantee or Creditor: The Departm	ent of Social and Health Services (DSHS).	
Legal Description:		
		Z,
Assessor's Property Tax Parcel Acco	ount Number: .	
DSHS claims that the debtor named Support (DCS) files a lien in the am	d above owes past-due child support. The Division of Child ount of \$	
	f the debtor named above except Tribal Trust property.	nty on
	the Legal Description section above.	
May 06, 2003	J. Knopp	
Date	Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100	J. Knopp	
Telephone Number	Person to Contact	
In reply, refer to: Case #: 1685873		
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997)	(FG REL:06/1990)	

(FG REL:06/1999) (1514:030506:035711) 1685873/1514