Nov 19 3 30 PM 101 CAWRY

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 PO BOX 4269 VANCOUVER WA 98682-0099



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

NOTICE AND STATEMENT OF LIEN

doing business as:	muel S. Seamen		also known as or
	N 534-90-3085	DOB 01/15/69 .	5
Grantee or Creditor: Ti	ne Department of So	cial and Health Services (DSHS)).
Legal Description:	O_{\prime}	•	77
Assessor's Property Tax	Parcel Account Num	ber: .	
DSHS claims that the de Support (DCS) files a lie	btor named above on in the amount of \$	wes past-due child support. Ti	he Division of Child ania County on:
		tor named above except Tribal	
Only the property d	escribed in the Legal	Description section above.	AND SINGS
November 15, 2001 Date		J. Onborn Authorized Representative DIVISION OF CHILD SUPPORT	of tan
(360) 696-6100 Telephone Number		J. Osborn Person to Contact	In S
In reply, refer to: Case #: 15070	97	Sissifi to Correct	

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997)

(FG REL:06/1988) (2468:011115:221844) 1507097/2466