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Jul 31 9 13 MI 103 J. MICHAEL W V SON

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 0.411-5520





STATE OF WAS:HINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: doing business as:	Algerio L. Campbell		also known as or
	SSN <u>541-88-0084</u>	, DOB <u>10/10/74</u> .	
Grantee or Creditor:	The Department of Soc	ial and Health Services (DSHS),	
Legal Description:			
Assessor's Property T	Tax Parcel Account Numb	oer: •	
DSHS claims that the Support (DCS) files a	e debtor named above or lien in the amount of \$	wes past-due child support. The	
All real and perso	onal property of the debt	tor named above except Tribal 1	Frust property.
Only the propert	y described in the Legal	Description section above.	
July 28, 2003		J. Demich	
Date		Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100		J. Dem. h	
Telephone Number		Person to Contact	
In reply, refer to: Case #: 170)1650		
NOTICE AND STATEMENT OF I. DSHS 09-282 (REV. 04/1997)			(FG RFL:06/1095)

(FG REL:06/1009) (3520:030728:230802) 1701650/3520