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ALIESTOR J. MICHAEL GARVISON

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 98411-5520



NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: You Q. B doing business as:	(ildreth	also known as or
SSN <u>539-</u>	06-8343 DOB 09/06/81	
Grantee or Creditor: The Department	artment of Social and Health Services (I	DSHS).
Legal Description:	O .	odresa Uvr
Assessor's Property Tax Parcel	Account Number: •	
DSHS claims that the debtor re Support (DCS) files a lien in th	amed above owes past-due child suppose amount of \$ 2,500.10 in	ort. The Division of Child Skonania County on:
All real and personal prope	erty of the debtor named above except	Tribal Trust property.
Only the property describe	ed in the Legal Description section abo	ve.
October 27, 2003	J. Demich Authorized Representative DIMSION OF CHILD SUPP	ORT
(360) 696-6100	J. Demich	
Telephone Number	Person to Contact	나는 [기기 회사를 모양하다]
In reply, refer to: Case #: 1714611		

(FG REL:06/1999) (3020:031027:223225) 1714611/3520