FT.ED FOR RECORD
SKAMANIA OD, WASH
BY DSHS

DEC 31 3 24 PN '01

AUDITOR
GARY M. OLSON

also known as or

DIVISION OF CHILD SUPPORT 500 N NORATN \$221.0 PO BOX 5550 NEWNICK WA 99336-0550

Grantor or Debtor: Shelly K. Brock



dalam broduces as

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

NOTICE AND STATEMENT OF LIEN

congress as:		
SSN <u>562-33-6</u>	584 , DOB 07/03/73	
Grantee or Creditor: The Departme	nt of Social and Health Services (DSHS),	
Legal Description:		
Assessor's Property Tax Parcel Accou	unt Number: •	
DSHS claims that the debtor named Support (DCS) files a lien in the amo	above owes past-due child support. The I bunt of \$	
All real and personal property of	the debtor named above except Tribal Tru	st property.
Only the property described in the	he Legal Description section above.	
		Andrewa T
December 25, 2001	D. Loonis	Adminut II
Date	Authorized Representative DIVISION OF CHILD SUPPORT	412 city
(503) 374-2000	D. Leonis	der werten merken eine
Telephone Number	Person to Contact	
In reply, refer to: Case #: 1341894		
NOTICE AND STATEMENT OF LIEN DSH5 09-282 (REV. 04/1997)		(FG REL:06/1999) (2509:011225:001341) 1341894/2569