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HIR 4 12 56 FN '97

CARY H. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98662-0269



STATE OF WASHINGTON

7511/1	DEPARTMENT OF SOC DIVISION OF CH	IAL AND HEALTH SERVICE HLD SUPPORT (DCS)	ES
	NOTICE AND ST	TATEMENT OF LIE	
Grantor or Debtor:: Ro	OB 11/29/47	- 22	, SSN
Grantee or Creditor: T	he Department of Social a	nd Health Services (DSHS)	
Legal Description:			
- <i>x</i>		. 7	1
Assessor's Property Tax	Parcel Account Number:		7
DSHS claims that the de Support (DCS) files a lie	ebtor named above owes pen in the amount of \$ _21	past-due child support. TI 1,450.00 in Skan	he Division of Child ania County on:
	d property of the debtor na		
March 02, 1997		K. Rhodes	
V	- (Authorized Representative DIVISION OF CHILD SUPPORT (360) 696–6391 Telephone Number	
In reply, refer to:		relephone Number	
Case #: 11012		1	
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV 09-1996)	हेक्स सब म्हेराट महीराट	d. Dir 🗸	(FĞ kEL:12/96) (2328:970302:091821) 1101299/2328