127645

BOOK 163 PAGE 585

FILEDA MELGORO SKAPARE DO WASH BY DS HS

HAR 20 4 53 FH '97

CLOWRY

AUDITOR O

GARY H. OLSON

DIVISIÓN OF CHILD SUPPORT 5411 B NIGL PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98662-0269



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

NOTICE AND STATEMENT OF LIEN		
Grantor or Debtor: Gregory L. West DOB 03/29/43	, SSN	_
Grantee or Creditor: The Department of Social a	nd Health Services (DSHS).	
Legal Description:		
, and a	V 7	-
Assessor's Property Tax Parcel Account Number:		- 1
DSHS claims that the debtor named above owes Support (DCS) files a lien in the amount of \$	past-due child support. The Divis 2,370.23 in Skamania	ion of Child County on:
All real and personal property of the debtor i	named above except Tribal Trust p	roperty.
Only the property described in the Lega! Des	scription section above.	
March 18, 1997	C. Johnson	
Date	Authorized Representative DIVISION OF CHILD SUPPORT	7
	(360) 696-6391	
In reply, refer to:	Telephone Number	
Case #: 135482		
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 09 1996)		(FG RFL 12/96) (1694 970318 202723) 135482/3084
		रम्भागता
		a texed, Cir