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FILED FOR RECORD SKAHAMA CO. WASH BY DSHS

Aug 26 3 38 FH '97

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL 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: William R. DOB 12/06		34	, SSN	<u> </u>
Grantee or Creditor: The Departm	nent of Social ar	nd Health Services	(DSHS).	
Legal Description:	X		•	
Assessor's Property Tax Parcel Acc	ount Number:	*		_ ¬
DSHS claims that the debtor name Support (DCS) files a lien in the a	ed above owes mount of \$1	past-due child sup 1,381.83 i	port. The Divisi n Skama nia	on of Child County on:
All rea! and personal property	of the debtor n	amed above exce	pt Tribal Trust pi	operty.
Only the property described i	n the Legal Des	cription section ab	cve.	V.
			5	garen /
August 20, 1997 Date		2. Stevens Authorized Represen DIVISION OF CHILD	tative	rad. Dir Stati 665
In reply, refer to:	((360) 696-639 Telephone Number	1	
Case #: 867630	941901	1172219	1025229	•
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 09 1996)	7			(FG REL-12/96) (0725 970820 180959)