129315

BOOK 169 PAGE 356
FILED FOR RECORD
SKAMANIA CO. WASH
BY DEHS

SEP 24 1 09 PM '97

Q Joury

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E NILL 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)

/ \#/	DIVISION O	F CHILD SUPPORT (DCS)	
		STATEMENT OF LIEN	4.0
Grantor or Debtor:	Michelle W. Wake DOB 03/15/68		SSN
Grantee or Creditor		— ial and Health Services (DSHS).	
Legal Description:	X		
Assessor's Property	Tax Parcel Account Numb	er:	7
DSHS claims that the Support (DCS) files	e debtor named above ow a lien in the amount of \$	ves past-due child support. The 590.94 in Skaman	Division of Child Leading County on:
All real and person	onal property of the debto	or named above except Tribal Tri	
		Description section above.	
September 21, 19	997	J. Demich	Progres
Date	· /	Authorized Representative DIVISION OF CHILD SUPPORT	123
In reply, refer to:	- ((800) 345-9984 Telephone Number	
Case #: 123	8167		
NOTICE AND STATEMENT OF LIEP DSHS 09-282 (REV. 09/1996)	N .		(FG REL:12/96) (3520:970921:224928) 1238167/3520

474