129616

BOOK 170 PAGE 369

FILED FOR RECORD SKAMANIA GO, WASH BY DSHS

Oct 27 4 44 PM '97

PLOWRY

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P O BOX 4269 VANCOUVER WA 98562-0269



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

/\#/	DIVISION OF	CHILD SUPPORT (DCS)	L -
		STATEMENT OF LIEN	9
Grantor or Debtor:	Bradley D. Thompson DOB 09/18/56	, SSN	
Grantee or Creditor:	The Department of Soci	al and Health Services (DSHS).	
Legal Description:	X		_
	ax Parcel Account Number	T	
DSHS claims that the Support (DCS) files a	debtor named above ow lien in the amount of \$	es past-due child support. The Division of Ch	nild ounty on:
All real and perso	nal property of the debto	or named above except Tribal Trust property.	
Only the property	described in the Legal E	Description section above.	
		En person	/,
October 22, 1997 Date		R. Fisher Authorized Representative DIVISION OF CHILD SUPPORT	7
//	- 6	(800) 345-9984	
In reply, refer to:		Telephone Number	

- Marke 第三名記記 And Marke できる もっぱ さんりできません はまる ない an an

(FG REL:12/96) 0207 970107 1 71 704308/70324

ate i