129657

BOOK 170 PAGE 545

FILED FOR RECORD
SKAMANIA OD WASH

BY DS.HS WASH

Nov 3 9 51 M '97

AUDITOR

GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 B 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)

| | | CHILD 30FFORT (DC3) |
|---------------------|------------------------------|--|
| | NOTICE AND | STATEMENT OF LIEN |
| | | THE THE PARTY OF LIEFA |
| Grantor or Debtor: | Daniel W. Voltz | , SSN |
| | DOB 11/20/60 | , 33N |
| | | |
| Grantee or Credito | r: The Department of Socia | al and Health Services (DSHS). |
| | - 1 | |
| Legal Description: | | |
| | 770 | |
| | _ ~ | h 16 |
| | - | L ' |
| | | |
| Assessor's Property | Tax Parcel Account Numbe | er: |
| DCHC alatas at a st | | |
| Support (DCS) (In- | ie debtor named above owe | es past-due child support. The Division of Child |
| anthor (DC2) lifes | a lien in the amount of \$ | 4,533.74 in Skamania County on: |
| All real and nor | constant to the | |
| ca in real and pers | onal property of the debto | r named above except Tribal Trust property. |
| | | |
| — striy the proper | rty described in the Legal D | escription section above. |
| B. Th. | | |
| - | | |
| October 16, 199 | 7 | J. Demich |
| Date | | Authorized Representative |
| | | DIVISION OF CHILD SUPPORT |
| | | |
| 40 | | (800) 345-9984 |
| | 5.45 | Telephone Number |
| In reply refer to: | | |

Case #: 1138357

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 09/1996)

(FG REL:12/95) (3520.971016.181034) 1138357/3520

ett in