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FILED FAM PECORD SKAMMALLE, WASH BY __DSHS____

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OXOUTY

AUDITOR

GARY H. 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: Douglas C. Austin DOB	, SSN
Grantee or Creditor: The Department of Social and Health Services (DSHS).	
Legal Description:	
Assessor's Property Tax Parcel Account Number:	
DSHS claims that the debtor named above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 1,265.00 in Skamania County on:	
All real and personal property of the debtor named above except Tribal Trust property.	
Only the property described in the Legal Description section above.	
	34.4.
December 30, 1997 Date	R. Larson Authorized Representative DIVISION OF CHILD SUPPORT (800) 345–9984 Telephone Number
In reply, refer to:	

(FG REL 12/96) (1533 971230 181036) 1327861/1533

NOTICE AND STATEMENT OF HEN DSHS 09-282 (REV_09 1996)