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BOOK 174 PAGE 725

FILED FOR BLEGORD SKAHAN COLLEASH BY DSHS____

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AUDITOR O

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)

/ \W/ I	DIAMON OF CHILD SONDOKI	(DCS)
NO	TICE AND STATEMENT	OF LIEN
Grantor or Debtor: Jeffery DOB 07/	L. Sparks	, SSN
Grantee or Creditor: The Depa	rtment of Social and Health Sen	rices (DSHS).
Legal Description:		
	- X - 1	7
Assessor's Property Tax Parcel A	Account Number:	
DSHS claims that the debtor na Support (DCS) files a lien in the	med above owes past-due child amount of \$ 5,305.00	support. The Division of Child in Skamania County on:
All real and personal proper		
Only the property described	I in the Legal Description section	n above
. 7 7		\sim
March 19, 1998	R. Opoka	Mares /
Date	Authorized Repr DIVISION OF C	esentative in itset
- 1	<u>(800)</u> 345-	9984
in reply, refer to:	Telephone Num	ber
Case #: 1023557	1210313	
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 09 1996)		(FG REL:12/96) {0824.980319.181202}

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