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BOOK 177 PAGE 806

FILLD FOR RECORD SKAM, NIL SO, WASH BY DSHS JUN 2 12 23 PM '98

CLOWRY

AUDITORY

GARY H. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P O BOX 4269 YANCOUVER WA 98662-0269



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

/ \W/ I	DIVISION OF CHILD SUPPORT	(DCS)
NO	TICE AND STATEMENT	OF LIEN
Grantor or Debtor: <u>Kristi J</u> DOB <u>02/</u> 0		, SSN
Grantee or Creditor: The Depa	rtment of Social and Health Serv	ices (DSHS).
Legal Description:	X	
	- N 7	-
Assessor's Property Tax Parcel A	ccount Number:	
DSHS claims that the debtor nat Support (DCS) files a lien in the	med above owes past-due child amount of \$200.00	support. The Division of Child in Skamania County on:
All real and personal proper	ty of the debtor named above e	xcept Tribal Trust property.
	in the Legal Description section	
May 19, 1998	J. Cram	Philad (s)
Date	Authorized Representation OF CH	esentative IIID SUPPORT
J 2	(800) 345-1 Telephone Numb	
In reply, refer to: Case #: 1348356		
NOTICE AND STATEMENT OF EIEN OSHS 09-282 (REV. 09 1996)		(FG REL:12/96) (3404/980519/181935) 1348/356/3404