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FILED FOR RECORD SKANANIA CO. WASH BY DS HS

AUDITOR O GARY M. OLSON

DIVISION OF CHILD SUPPORT 5411 E MILL PLAIN BLDG 3 P 0 BOX 4269 VANCOUVER NA 98662-0269



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

/ \W/	DIVISION OF	CHILD SUPPORT (DCS)	
	NOTICE AND	STATEMENT OF LIEN	4.0
Grantor or Debtor:	Micholaus R. Taylor DOB 02/23/72		SSN
Grantee or Creditor:	The Department of Social	and Health Services (DSHS).	
Legal Description:	×		
Assessor's Property T	ax Parcel Account Number		
DSHS claims that the Support (DCS) files a	debtor named above owe lien in the amount of \$	s past-due child support. The 1,915.20 in Skaman	
All real and perso	nal property of the debtor	named above except Tribal Tr	
Only the property	described in the Legal De	scription section above.	о о
. T.			Depressed
July 30, 1998 Date		R. Pisher	Sirect
J .		Authorized Representative DIVISION OF CHILD SUPPORT	Tared
- All		(360) 696-6391	
In reply, refer to:	- N.	Telephone Number	
Case #: 9507	80 1024223		

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

(FG REL:12/96) {0824:980730:181809; 950780/0824