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FILED FOR RECORD SKAMANIA CO. WASH BY DSHS

SEP 14 8 50 AH '98

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

	THE PERSON NAMED IN COLUMN 1
Grantor or Debtor: Ceasar M. Villaca	
DOB	, SSN
	~ ~ ~ ~
Grantee or Creditor: The Department of Soc	ial and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Account Numb	per:
DSHS claims that the debtor named above ov Support (DCS) files a lien in the amount of \$	ves past-due child support. The Division of Child  952.05 in Skamania County on:
All real and personal property of the debt	
Only the property described in the Legal	
	3 of empire 1/2
September 09, 1998	J. Demich
Date	Authorized Representative DIMSION OF CHILD SUPPORT
	(350) 505 5201
	(360) 696-6391
In reply, refer to:	Telephone Number
Case #: 1390099	
Case # . 1350099	
NOTICE AND STATEMENT OF LIEN	(FG REL:12/96)

(FG REL:12/96) (3520:980909:181422) 1390099/3520