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FILED FOR REGORD SKALABLY OD, WASH BY DSHS

Oct 20 3 05 PH '98

O ZOWY

AUDITORO

GARY M. OLSON

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



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

/ \W/ I	DIVISION OF	CHILD SUPPORT (DCS)	
N	OTICE AND	STATEMENT OF LIEN	
Grantor or Debtor: Robert	A. Bevans	,5	SN
DOR T	1/17/66		
Grantee or Creditor: The De	partment of Soci	al and Health Services (DSHS).	
Legal Description:	971		
		7 7	-
- /	r ¬		
Assessor's Property Tax Parcel Account Number:			
DSHS claims that the debtor Support (DCS) files a lien in t	named above ow the amount of \$	es past-due child support. The [13,479.00 in Skamani	Division of Child a County on:
		or named above except Tribal Tru	
		Description section above.	
	- 10	- 1	The could
October 18, 1998	-	C. Louthan	stexed, 14
Date	- 47 -	Authorized Representative	14312
1 a	- 10	DIVISION OF CHILD SUPPORT	10193
	- 10	(360) 696-6391	
	- Th.	Telephone Number	
In reply, refer to:		. #	-
Case #: 619896	998385		
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 09-1996)			(FG REL:12/96) {1155-981918-109250} \$198-98-98-98-98