134769

FILED FOR HEGORD SKAMANI O WASH BY Shele & WA DSHS

AFR 6 11 23 AH 199

SAMBLE

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)

/ VM/	DIAISION OF (CHILD SUPPORT (DCS)	- The T
• • • • • • • • • • • • • • • • • • •	NOTICE AND	STATEMENT OF LIEN	
Grantor or Debtor: 1	Michael K. Sheppler	-, S	
.*	DOB <u>04/28/59</u>		
Grantee or Creditor:	The Department of Social	and Health Services (DSHS).	
Legal Description:			
1.7			4
Assessor's Property Ta	ax Parcel Account Number	7 7	
DSHS claims that the Support (DCS) files a	debtor named above ower lien in the amount of \$	s past-due child support. The D 1,686.96 in Skamani.	Pivision of Child County on:
All real and person	nal property of the debtor	named above except Tribal Trus	
	described in the Legal De		
Harch 31, 1999	18	~ (-): /
Date	W	J. Demich	
	,	Authorized Representative DIVISION OF CHILD SUPPORT	
· 10-4	F	(360) 696-6391	
	•	Telephone Number	4 4 5
n reply, refer to:			**

Case #: 1327823

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

(FG REL:12/96) (3520:990331:181350) 1327823/3520