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CAWRY

GARY H. OLSON

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



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

NOTICE	L MAS STATEMENT OF THE	
Grantor or Debtor: Timothy E. S DOB 11/18/61	iikanen s	SNEED II.
Grantee or Creditor: The Departmen	nt of Social and Health Services (DSHS).	
Legal Description:		
		4
Assessor's Property Tax Parcel Account	nt Number:	
DSHS claims that the debtor named a Support (DCS) files a lien in the amou	above owes past-due child support. The E unt of \$ 6,531.98 in Skanani	Division of Child County on:
All real and personal property of t	the debtor named above except Tribal Tru	
	e Legal Description section above.	\neg
	a security section above.	April LE-
April 08, 1999	J. Demich	Miraci
Date	Authorized Representative DIVISION OF CHILD SUPPORT	Filmed Saried
	(360) 696-6391	5
In reply, refer to:	Telephone Number	
Case #: 865880		
NGDCE AND STATEMENT OF LIEN.		(FG RFI 12/96)

(FG FEL:12/96) (3520:990408:181249) 865880/3520