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DIVISION OF CHILD SUPPORT 5411 B 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			
Grantor or Debtor: doing business as:	John C. Maxwell		, also known as or
	SSN	, DOB <u>12/30/53</u>	
Grantee or Creditor	: The Department of Soc	cial and Health Services (DSHS).	Inpatring .
Legal Description:			Wines In The State of the State
Assessor's Property	Tax Parcel Account Numl	ber:	
DSHS claims that the Support (DCS) files a	e debtor named above or a lien in the amount of \$	wes past-due child support. The  17,515.00 in Skame	
All real and person	onal property of the deb	tor named above except Tribal T	
-		Description section above.	11/
December 22, 199	<u>99</u> : =	K. Morelli	
Date		Authorized Representative DIMISION OF CHILD SUPPORT	
(360) 696-6391		K. Morelli	
Telephone Number		Person to Contact	
In reply, refer to:  Case #: 12	81740		
NOTICE AND STATEMENT OF LIE DSHS 09-282 (REV. 04/1992)	N		(FG REL:06/1999) MR24-901732-0204511

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