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FILE SALES SALES Jul 19 10 21 th 100 Oxawry SANTI OLLON

DIVISION OF CHILD SUPPORT 5415 Evergreen Way P.O. Box 4282 MS: N31-2 Everett Wa 98203-9282



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

	MOTICE AND	STATEMENT OF L	IEN TO THE
Grantor or Debtor: Ric	hard W. Kaaland	F A B	also kunun as an
	K KAALAMD		, also known as or
SSN		DOB 09/25/64	
Grantee or Creditor: The	e Department of Soc	ial and Health Services (DS	HS).
Legal Description:	- "		
n	<i>_</i>	V 7	-
- 4			
Assessor's Property Tax P	arcel Account Numb	er: .	
DSHS claims that the del	tor tramed above		A
Support (DCS) files a lien	in the amount of \$	wes past-due child support.	The Division of Child amania County on:
		or named above except Tri	
		Description section above.	
— The property de	acioco ai ule regal	rescription section above.	· Paparine /
January 12, 2000		73. 27 1 3.4	ledered the
Date		R. Marshall	e fautired
	- 46	Authorized Representative DMSION OF CHILD SUPPORT	*Street
(425) 438-4800			48.e1
Telephone Number	- 10	R. Marshall	
		Person to Contact	
In reply, refer to: Case #: 122454	. 1		•
NOTICE AND STATEMENT OF LIEN OSHS 09-282 (REV. 0V 1997)			(FG REL:08/1969)

(1295:000112:22134 1224540/1295