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SEAL
DSHS

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Amoser

GARY L. 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)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Aaron W. Luceford also known as or
doing business as: _____

SSN [REDACTED] DOB 04/20/75

Grantee or Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

[Handwritten notes and signatures]

Assessor's Property Tax Parcel Account Number: _____

DSHS claims that the debtor named above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 1,068.00 in Skamania County on:

- ☒ All real and personal property of the debtor named above except Tribal Trust property.
☐ Only the property described in the Legal Description section above.

February 23, 2000

Date

(360) 696-6100

Telephone Number

In reply, refer to:

Case #: 1457376

J. Demich
Authorized Representative
DIVISION OF CHILD SUPPORT

J. Demich
Person to Contact

NOTICE AND STATEMENT OF LIEN
DSHS 09-282 (REV. 04/1997)

(FC REL 06/1999)
(3520-000223-231817)
1457376/3520