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FILED FOR ALCORD SKALL BY DS HS TASH LER 12 3 ON LIT '00 CLOWRY GARY II. 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)

## OTICE AND STATEMENT OF I

| HOTICE  | AND STATEMENT OF LIE                                       | W . W.                                   |
|---|--|--|
| Grantor or Debtor: Donald L. Hami   | lton   | , also known as or                       |
| doing business as: DONNIE HAMILIN   | ON   | - 10                                     |
|   |  |  |
| SSN   | , DOB <u>04/17/66</u>                                      |  |
| Grantee or Creditor: The Department of  | of Social and Health Services (DSHS)                       |  |
| Legal Description:  |  | •  |
| Assessor¹s Property Tax Parcel Account I  | Number: .  |  |
| DSHS claims that the debtor named abo<br>Support (DCS) files a lien in the amount | we owes past-due child support. To of \$ 19,436,41 in Skan |  |
| All real and personal property of the   | debtor named above except Tribal                           | Trust property.                          |
| Only the property described in the t  | egal Description section above.                            | Pro-crares                               |
| April 05, 2000  | C. Westbrook   | adirac.                                  |
| Date  | Authorized Representative<br>DIVISION OF CHILD SUPPORT     | *Imed<br>**sind                          |
| (360) 696-6100  | C. Westbrook   |  |
| Telephone Number  | Person to Contact  |  |
| In reply, refer to:   |  |  |
| Case #: 848811 1116   | 030 1168196  |  |
| NOTICE AND STATEMENT OF LIEN<br>DSHS 09-282 (REV. 04/1997)                        |  | (FG REL:08/1998)<br>(PARR-000406-224220) |

848811/2315