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DSHS

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DIVISION OF CHILD SUPPORT 5411 H 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:<br>doing business as:                   | Michael G. Simmons         |  | , also known as or |
|--|----------------------------|--|--------------------|
|  | SSN                        | , DOB <u>07/01/54</u> .                                | ,                  |
| Grantee or Creditor  | : The Department of Soc    | ial and Health Services (DSHS).                        |                    |
| Legal Description:   |                            | h . W  |                    |
| **   |                            |  |                    |
| Assessor's Property  | Tax Parcel Account Numb    | er:  |                    |
| pport (DCD) mes  | a nert in the amount of \$ |  | nia County on:     |
| All real and person  | onal property of the debt  | or named above except Tribal T                         | rust property.     |
|  |                            | Description section above.                             | 100:100 to         |
| Date   | - #                        | J. Demich  | T. I Though        |
|  | - //                       | Authorized Representative<br>DIVISION OF CHILD SUPPORT | Miles              |
| (360) 696-6100   | <u>.</u>                   | J. Demich  | Α                  |
| Telephone Number   | - "                        | Person to Confact                                      |                    |
| In reply, refer to:<br>Case #: 151                         | 11807                      |  |                    |
| NOTICE AND STATEMENT OF LIEP<br>DSHS 09-282 (REV. 04/1997) | ٠ .                        |  | (FG REL:06/1999)   |

(FG REL:06/1999) (3520:000609:002110) 1511807/3520