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DSHS

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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: Michael P. Harvey also known as or
doing business as: _____

SSN [REDACTED] DOB 11/10/46

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

Legal Description:

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 \$ 10,544.93 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.

June 18, 2000

Date

(360) 696-6100

Telephone Number

In reply, refer to:

Case #: 883454

NOTICE AND STATEMENT OF LIEN
DSHS 09-262 (REV. 04/99/7)

K. Young
Authorized Representative
DIVISION OF CHILD SUPPORT

K. Young
Person to Contact

(FG REL-06/1988)
(0725-000618-021839)
883454/0662