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DSHS 29 4 05 in 10 Page 1 ARY IL OLSON

DMSION OF CHILD SUPPORT 5411 B 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

	AS OLVIENCIAL OF FIELA	
Grantor or Debtor: Russell B. Noodi	alla	lso known as or
SSN	, DO8 <u>05/27/37</u>	
Grantee or Creditor: The Department of	Social and Health Services (DSHS).	*
Legal Description:		3
Assessor's Property Tax Parcel Account N	umber:	
DSHS claims that the debtor named above Support (DCS) files a lien in the amount of	e owes past-due child support. The D	ivision of Child County on:
All real and personal property of the o		Oddiny on.
Only the property described in the Le		, By-siene 🗸
June 26, 2000	P. Taff	ledered this
Date	Authorized Representative	#6 reco
	DIVISION OF CHILD SUPPORT	4 Timed
(360) 696-6100	P. Taff	44,74
Telephone Number	Person to Contact	
In reply, refer to:	- Contract	
Case #: 1240709	45	
NOTICE AND STATEMENT OF LIEN DSHS 09-262 (REV. 04/992)	•	/EC DEL de donni

(1316:000626:225932 1240709/1316