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FILL THE REGIONO
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Nov 21 11 43 AT '00 LAID VSCR GARY H. OLSON

DIMSION 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

doing business as:	Belcher	, also known as or
SSN	, DOB 11/15/63	
Crantee or Creditor: The Depa	ortment of Social and Health Services	(DSHS).
Legal Description:	11	some of
Assessor's Property Tax Parcel A	Account Number: .	A STATE OF THE STA
DSHS claims that the debtor na Support (DCS) files a lien in the	amed above owes past-due child sup e amount of \$ _20,585.88	port. The Division of Child  Skanania County on:
All real and personal proper	rty of the debtor named above exce	pt Tribal Trust property.
	d in the Legal Description section ab	
November 16, 2000 Date	M. Combs  Authorized Representativ  DIVISION OF CHILD SUR	C PORT
(360) 696-6100	M. Combs	
Telephone Number	Person to Contact	
In reply, refer to:  Case #: 1342222	1545677	
NOTICE AND STATEMENT OF LIEN DSHS 09-182 (REV. 04-199.")		(FG REL-05/1999)

(FG REL05/1999) (9893:001115:221633) 1342222/2639