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SEARCH DSHS

AJOHOR
J. MICHAEL GARVISON

DIVISION OF CHIED SUPPORT 5411 B HILL PLAIN BLDG 3 PO BOX 4269 VANCOUVER WA 98682-0099

Case #: 519997

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997)



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIFE

	OHEL AND STATEMENT	OF LIEN
Grantor or Debtor: Timoth doing business as:	y B. Knight	, also known as or
SSN	DOB 10/12/68	
Grantee or Creditor: The De	partment of Social and Health Serv	ices (DSHS).
Legal Description:		Fry. 119 case
Assessor's Property Tax Parce	el Account Number:	¥93
DSHS claims that the debtor Support (DCS) files a lien in	named above owes past-due child the amount of \$ 365.00	support. The Division of Child in Skamenia County on:
All real and personal pro	perty of the debtor named above e	except Tribal Trust property.
Only the property descri	bed in the Legal Description section	n above.
March 27, 2002	A. Cullen	
Date	Authorized Represer DIMISION OF CHILL	ntative SUPPORT
(360) 696-6100	A. Cullen	
Telephone Number	Person to Contact	
In roph, rafe- t-		

(FG REL-05/1909) (3083-020327:213318) 519997/3063