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AUGHOR

J. MICHAEL GARVISON

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



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 LIEN

Grantor or Debtor: Luke W. Talkingto doing business as:	, also known as or
SSN	DOB 04/01/66
Grantee or Creditor: The Department of S	ocial and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Account Nur	mber: .
Only the property described in the Legal	btor named above except Tribal Trust property. al Description section above.
June 20, 2002 Date	M. Combs Authorized Representative DIMSION OF CHILD SUPPORT
(360) 696-6100 Telephone Number	M. Combs
In reply, refer to: Case #: 1319559	Person to Contact