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DSHS

OLasny

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 98411-5520

In reply, refer to:

Case #: 1511795

NOTICE AND STATEMENT OF LIEN OSHS 09-282 (REV. 04-1597)



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIMSION OF CHILD SUPPOPT (DCS)

/ /III i DIVISI	ON OF CHILD SUPPORT (DCS)
NOTICE	AND STATEMENT OF LIEN
Grantor or Debtor: Joshua B. Jone	, also known as or
doing business as:	
SSN	DOB 07/17/79
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 at Support (DCS) files a lien in the amount	oove owes past-due child support. The Division of Child no of \$ County on:
All real and personal property of the	he debtor named above except Tribal Trust property.
Only the property described in the	e Legal Description section above.
Tules 10 2002	
July 30, 2003	Shankle     Authorized Representative
. ~ /	DMISION OF CHILD SUPPORT
(360) 696-6100	M. Shankle
Telephone Number	Person to Contact

(FG PEL 06/1999) (3592 030730:221024) 1511795/3592