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DIVISION OF CHILD SUPPORT

PO BOX 11520 TACONA WA 98411-5520





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

NOTICE AND STATEMENT OF LIEN

doing business as:	Daniel L. Hagerstrom		, also known as or
	SSN	, DOB <u>06/12/69</u>	=\
Grantee or Creditor	: The Department of Soc	ial and Health Services (DS	HS).
Legal Description:	8		. 1
Assessor's Property	Tax Parcel Account Numb	per:	_
DSHS claims that the Support (DCS) files	e debtor named above or a lien in the amount of \$	ves past-due child support. 13,472,58 in St	The Division of Child
All real and person	onal property of the debi	tor named above except Tri	bal Trust property.
	>	Description section above.	7
Date	13	J. Demich Authorized Representative DIMSION OF CHILD SUPPORT	
(360) 696-6100 Telaphone Number	_ \	J. Demich Person to Contact	
In reply, refer to:	£004 1751011		

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