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DIVISION OF CHILD SUPPORT 2121 S STATE ST PO BOX 11520 N 27-3 TACOMA WA 98411-5520



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

HOHEL	AND STATEMENT OF LIE	~ ~ ~
Grantor or Debtor: Ralph R. Rose doing business as:		_, also known as or 
SSN	DOB <u>08/27/55</u>	
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 absorped (DCS) files a lien in the amoun	ove owes past-due child support. The tof \$ 23,100.00 in Skam	
All real and personal property of the Only the property described in the		
December 22, 2003	R. Blair	
Date	Authorized Representative DIVISION OF CHILD SUPPORT	1 /
(253) 597-3700	K. Blair	
In reply, refer to: Case #: 1059938	Person to Contact	
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997)		(FG REL:06/1999)