Doc # 2004155519
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of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$0.00

DIVISION OF CHILD SUPPORT

PO BOX 11520 TACOMA WA 98411-5520



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

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Jeanette L. Ulery	, also known as or
doing business as:	
SSN	, DOB <u>07/28/66</u>
Grantee or Creditor: The Department of So	ocial and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Account Nur	mber: •
Support (DCS) files a lien in the amount of	
All real and personal property of the de	ebtor named above except Tribal Trust property.
Only the property described in the Leg	al Description section above.
December 01, 2004	D. Taylor
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(425) 438-4800	D. Taylor
Telephone Number	Person to Contact
In reply, refer to: Case #: 1800812	

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) (FG REL:06/1999) (0238:041201:022952) 1800812/0238