Doc # 2005157043
Page 1 of 1
Date: 04/21/2005 01:27P
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$6.00

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: Sylas E. O Dell	, also known as or
doing business as: SILAS E O DELL	
SSN <u>532-96-3492</u>	, DOB <u>08/30/84</u>
	The state of the s
Grantee or Creditor: The Department of S	Social and Health Services (DSHS).
i deposition	
Legal Description:	
4 4 7	
Assessor's Property Tax Parcel Account Nu	ımber: •
	_ () \
	owes past-due child support. The Division of Child
Support (DCS) files a lien in the amount o	f \$ 296.00 in Skamania County on:
G	(alatan named alaska ayaant Tribal Tuyat mranartu
All real and personal property of the d	lebtor named above except Tribal Trust property.
Only the property described in the Le	al Description section above.
- Only the property decompose in the ca	
April 19, 2005	B. Munoz-Erwin
April 19, 2003 Date	Authorized Representative
Date	DIVISION OF CHILD SUPPORT
(360) 696-6100	B. Munoz-Erwin
Telephone Number	Person to Contact
In reply, refer to:	
Case #: 1773092 18186	564
NOTICE AND STATEMENT OF LIFN	(FG REL:06/1999)

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

(FG REL:06/1999) (2133:050419:002650) 1773092/2133