Doc # 2004155207
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Date: 11/16/2004 10:15A
Filed by: DEPT OF SOCIAL & HEALTH SVCS
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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: Michael J. Calkins doing business as:	, also known as or
SSN,	DOB <u>02/27/79</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 above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$inSkamania County on:	
All real and personal property of the debtor named above except Tribal Trust property.	
Only the property described in the Legal Description section above.	
November 09, 2004	M. White
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	M. White
Telephone Number	Person to Contact
In reply, refer to: Case #: 1688001 1770438	

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) (FG REL:06/1999) (1579:041109:212441) 1688001/1579