Doc # 2005156045

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Date: 01/27/2005 09:47A

Filed by: DEPT OF SOCIAL & HEALTH SVCS

Filed & Recorded in Official Records
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: Shane doing business as: SHANE	A. Hughs ALLEN HUCHS	, also known as or
SSN <u>53</u>	32-80-5040 , DOB <u>10/02/</u>	70
Grantee or Creditor: The D	Department of Social and Health S	ervices (DSHS).
Legal Description:	(O)	
Assessor's Property Tax Pare	cel Account Number: .	
Support (DCS) files a lien in	or named above owes past-due che the amount of \$	
Only the property desc	ribed in the Legal Description sec	tion above.
January 22, 2005 Date	H. Hughes Authorized Repr DIVISION OF CH	
(360) 696–6100 Telephone Number	H. Hughes Person to Conta	ct ·
in reply, refer to:		

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

Case #: 1802095

(FG REL:06/1999) (9893:050122:192938) 1802095/2781