Doc # 2005157329
Page 1 of 1
Date: 05/18/2005 11:56A
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$8.00

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:	Teresa M. Garcilaso		, also known as or
doing business as:			,
J			,
	SSN <u>592-07-9587</u> , D	OB 12/27/69	4.
	-		
Grantee or Creditor:	: The Department of Social a	and Health Services (DSHS).	_ 1
_			
Legal Description:		•	
	_ \		
4	\sim	94	7 1
- 4. 4			, ,
Assessor's Property Tax Parcel Account Number:			
763C33OF3 Troperty	Tax Tareer / Coodine Trainson		
DSHS claims that the	e debtor named above owes	past-due child support. The	Division of Child
	a lien in the amount of \$		
*			
All real and personal property of the debtor named above except Tribal Trust property.			
	to the offerd in the Level De		
☐ Only the proper	rty described in the Legal De	scription section above.	
May 16, 2005		. Mceldery	
Date		uthorized Representative	
		IVISION OF CHILD SOFFORT	•
(360) 696-6100	<u>r</u>	. Mceldery	
Telephone Number		erson to Contact	
In reply, refer to:			

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

Case #: 1842099

(FG REL:06/1999) (3393:050516:230636) 1842099/3393