Doc # 2005157330
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Date: 05/18/2005 11:57A
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$0.00

906793/3520

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: doing business as: Rick M. Bonneville		also known as or
SSN,	DOB <u>08/04/54</u>	4.
Grantee or Creditor: The Department of Social	al and Health Services (DSHS).	_ \
Legal Description:	`_(
Assessor's Property Tax Parcel Account Number	er: .	
DSHS claims that the debtor named above ow Support (DCS) files a lien in the amount of \$ All real and personal property of the debto	2,226.50 in Skamar or named above except Tribal Tr	County on:
Only the property described in the Legal Description section above.		
May 16, 2005 Date	J. Demich Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100	J. Demich	
Telephone Number	Person to Contact	
In reply, refer to: Case #: 906793 1751469		
NOTICE AND STATEMENT OF LIEN DSMS 09-282 (REV. 04/1997)		(FG REL:06/1999) (3520:050518:230610)