Doc # 2005159629
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Date: 11/23/2005 03:14P
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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: Jason J. Fowler | , also known as or |
|--|---|
| doing business as: | |
| 2011 | 202 20 400 |
| SSN | DOB <u>03/30/75</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 \$ | |
| 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 19, 2005 | J. Mendoza |
| Date | Authorized Representative DIVISION OF CHILD SUPPORT |
| (360) 696-6100 | J. Mendoza |
| Telephone Number | Person to Contact |
| In reply, refer to: | |

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) (FG REL:06/1999) (3081:051119:121817) 1469609/3081