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Page 1 of 1
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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:	Robin R. Wing	/ L 1	, also known as or
doing business as:			
-			,
	SSN	DOB <u>05/02/83</u> .	
Grantee or Creditor: The Department of Social and Health Services (DSHS).			
Legal Description:	$^{\circ}$		33
Assessor's Property Tax Parcel Account Number: .			
Support (DCS) files :	a lien in the amount of \$	ves past-due child support. The 8,254.00 in Skama or named above except Tribal T	nia County on:
_	ty described in the Legal I		
March 02, 2006		D. Collins	
Date	_	Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100		D. Collins	
Telephone Number		Person to Contact	
In reply, refer to:			
Case #: 16	23691 1726349		

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 04/1997) (FG REL:06/1999) (3960:060302;222149) 1623691/3960