Doc # 2006162350
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Date: 07/19/2006 01:14P
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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: Christ:	ina M. Sitherwood	, also known as of
doing business as:		,
SSN: XX	X-XX-8902 DOB	: 07/17/78
Grantee or Creditor. The De	epartment of Social and Health S	ervices (DSHS).
Legal Description:		
11.00	()	
Assessor's Property Tax Pa	rcel Account Number:	411
DSHS claims that the debto	paid when due, are judgments a r named above owes past-due ch the amount of \$ 2,123.97	nild support. The Division of Child
All real and personal pro	operty of the debtor named above	except Tribal Trust property.
Only the property descri	bed in the Legal Description sect	ion above.
July 15, 2006 Date	P. Taff Authorized Representative DIVISION OF CHILD SUP	
(360) 696-6100	P. Taff	
Telephone Number	Person to Contact	
		00017052970048865190000000142502

In reply, refer to: Case #: 1705297

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.1) 1316:20060715/ 1705297/1316