Doc # 2006162777
Page 1 of 1
Date: 08/25/2006 02:38P
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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: Paule	ette L. King	, also	o known as or
doing business as:			,
	1.7		<u> </u>
SSN:	XXX-XX-8365	DOB: 07/13/69	
Grantee or Creditor: The	Department of Social and I	Health Services (DSHS).	
Legal Description:	$O_{I}$		4
Assessor's Property Tax	Parcel Account Number:		· -
DSHS claims that the del		gments and accrue to the lien st-due child support. The Divi .99 in Skamania	
	, ,	<del></del>	<del></del>
All real and personal	property of the debtor name	ed above except Tribal Trust p	property.
Only the property des	scribed in the Legal Descript	tion section above.	
August 22, 2006 Date	K, Kinnie Authorized Repr		
(260) 606 6100	DIVISION OF CH	IILD SUPPORT	
(360) 696-6100 Telephone Number	K. Kinnie Person to Conta	net	
TOOPHOTIC NUMBER	i cigori to conta	0001723762002492177	0000000172502

In reply, refer to: Case #: 1723762

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NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.1) 2824:20060822/ 1723762/2824