Doc # 2006162799
Page 1 of 1
Date: 08/29/2006 12:50P
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Filed & Recorded in Official Records
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: Laryn W	. Grovom		also known as or
doing business as:	- 4		,
	7.77		,
SSN: xxx	X-XX <b>-</b> 2853	DOB: <u>04/16/60</u>	<del></del> ·
Grantee or Creditor: The De	partment of Social and H	ealth Services (DSHS).	- 1
Legal Description:		₹ ,	
	$O_{r}$		$\sim$
Assessor's Property Tax Par	cel Account Number:		1
Child support payments, not DSHS claims that the debtor Support (DCS) files a lien in	named above owes past	-due child support. The I	
All real and personal pro	perty of the debtor named	d above except Tribal Tru	ust property.
☐ Only the property describ	oed in the Legal Descripti	on section above.	
August 26, 2006	S. Woodwort	h	
Date	Authorized Repres DIVISION OF CHI		
(360) 696-6100	S. Woodwort	:h	
Telephone Number	Person to Contact	t	
		000083390000276:	164700000000262502

In reply, refer to: Case #: 833900

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001)

FG VER: (1.1) 3816;20060826/

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