Doc # 2006162810
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Date: 08/30/2006 11:58A
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
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 W. Whidde	en, also known as or
doing business as:	
SSN: <u>xxx-xx-333</u>	7DOB: <u>09/21/55</u> .
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Accou	nt Number:
DSHS claims that the debtor named al	n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child at of \$ 12,568.03 in Skamania County on:
All real and personal property of th	e debtor named above except Tribal Trust property.
\square Only the property described in the	Legal Description section above.
August 29, 2006	D. Falkner
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	D. Falkner
Telephone Number	Person to Contact
	0000445043001206179000000000222502

In reply, refer to: Case #: 445043

FG VER: (1.1) 4356:20060829/ 445043/4356

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