Doc # 2006163038
Page 1 of 1
Date: 09/20/2006 03:38P
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$0.80

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: Terry D	. Sampson	<u> </u>	, also	o known as or
doing business as:		1.6.3		,
		W .		
SSN: xxx	X-XX-7033	DOB:	08/04/64	•
Grantee or Creditor: The De	partment of Soci	ial and Health Se	rvices (DSHS).	1
Legal Description:	O		5	1
Assessor's Property Tax Par	cel Account Nun	nber:		
Child support payments, not DSHS claims that the debtor Support (DCS) files a lien in	named above o	wes past-due chi	ld support. The Divi	
All real and personal pro	perty of the debt	or named above	except Tribal Trust p	property.
Only the property describ	ped in the Legal	Description section	on above.	
September 16, 2006	R. B	ell		
Date		ized Representative ON OF CHILD SUPP	ORT	
(360) 696-6100	R. B	ell		
Telephone Number	Person	to Contact		
•			000192380002050372(	00000000132502

In reply, refer to: Case #: 1923800

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.1) 3079:20060916/ 1923800/3923