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Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
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: Thomas W. Reed, also known as or
doing business as: _____

SSN: XXX-XX-7692 DOB: 03/12/62

Grantee or Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

Assessor's Property Tax Parcel Account Number: _____

Child support payments, not paid when due, are judgments and accrue to the lien amount.
DSHS claims that the debtor named above owes past-due child support. The Division of Child
Support (DCS) files a lien in the amount of \$ 1,575.00 in Skamania County on:

- ☒ All real and personal property of the debtor named above except Tribal Trust property.
☐ Only the property described in the Legal Description section above.

October 23, 2006

Date

(360) 696-6100

Telephone Number

C. Bailey

Authorized Representative
DIVISION OF CHILD SUPPORT

C. Bailey

Person to Contact



000099636200329623200000000102502

In reply, refer to:
Case #: 996362

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

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