Doc # 2006163668
Page 1 of 1
Date: 11/13/2006 01:43P
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

doing business as:	
	,
SSN: <u>xxx-xx-76</u> 77 DOB: <u>03/31/77</u>	
Grantee or Creditor: The Department of Social and Health Services (DSHS).	
Legal Description:	4
Assessor's Property Tax Parcel Account Number:	
Child support payments, not paid when due, are judgments and accrue to the lien DSHS claims that the debtor named above owes past-due child support. The Divi Support (DCS) files a lien in the amount of \$ 1,532.00 in Skamania	
All real and personal property of the debtor named above except Tribal Trust p	property.
Only the property described in the Legal Description section above.	
November 07, 2006 T. Holloway	
Date Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 664-6900 T. Holloway	
Telephone Number Person to Contact	
In reply, refer to:	00000000052502

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

Case #: 1894899

FG VER: (1.2) 4185:20061107/ 1894899/4185