Doc # 2007164763
Page 1 of 1
Date: 01/24/2007 01:41P
Filed by: DEPT OF SOCIAL & HEALTH SVCS
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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: doing business as:	Johnny J. Green	•	()	, also known as or
doning backnood do.		707		
	SSN: <u>xxx-xx-616</u> 0		DOB:	
Grantee or Credito	r: The Department	of Social and Hea	alth Services (DSHS)	- N. J. 18
Legal Description:)),	·	N
Assessor's Propert	y Tax Parcel Accour	nt Number:		
DSHS claims that t		ove owes past-d	ents and accrue to the lue child support. The o <u>in Skamania</u>	e Division of Child
X All real and per	rsonal property of the	e debtor named	above except Tribal T	rust property.
Only the prope	rty described in the l	_egal Description	section above.	
January 22, 20	07	J. Demich		
Date		Authorized Represe DIVISION OF CHILL		•
(360) 696-6100) 	J. Demich		_
Telephone Number		Person to Contact		
In reply, refer to:	e e e e		0001610371004	.72032100000000122502
in reply, reser to.				

Case #: 1610371 1856026

FG VER: (1.3) 3520:20070122/ 1610371/3520

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