

Doc # 2007165081
Page 1 of 1
Date: 02/22/2007 12:28P
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: Timothy J. Longacre, also known as or
doing business as: _____

SSN: xxx-xx-5630 DOB: 08/01/88

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 \$ 1,742.00 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.

February 20, 2007
Date

(360) 696-6100
Telephone Number

D. Mceldery
Authorized Representative
DIVISION OF CHILD SUPPORT
D. Mceldery
Person to Contact



000188348500354340200000000032502

In reply, refer to:
Case #: 1883485 1974382