

Doc # 2007165082  
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Date: 02/22/2007 12:29P  
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: Christa L. Raymond, also known as or  
doing business as: \_\_\_\_\_

SSN: xxx-xx-6078 DOB: 02/21/70

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 \$ 1,733.00 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

A. Cullen  
Authorized Representative  
DIVISION OF CHILD SUPPORT  
A. Cullen  
Person to Contact



00018267250047438430000000042502

In reply, refer to:  
Case #: 1826725