Doc # 2007165987

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Date: 05/03/2007 02:22P

Filed by: DEPT OF SOCIAL & HEALTH SVCS

Filed & Recorded in Official Records

of SKANANIA 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: Jose C. Re	eynoso	, als	o known as or
doing business as:			,
			,
SSN:xxx-x	X-4995	DOB: <u>05/16/78</u>	
Grantee or Creditor: The Depar	tment of Social and He	alth Services (DSHS).	1
Legal Description:			1
Assessor's Property Tax Parcel	Account Number:		
Child support payments, not paid DSHS claims that the debtor nar	ned above owes past-	due child support. The Div	
Support (DCS) files a lien in the	amount of \$ 1,012.0	0 jn Skamania	County on:
XI All real and personal propert	y of the debtor named	above except Tribal Trust	property.
Only the property described	in the Legal Descriptio	n section above.	
May 01, 2007	L. Leavell		
Date	Authorized Repres	entative D SUPPORT	
(360) 696-6100	L. Leavell		
Telephone Number	Person to Contact		

In reply, refer to: Case #: 1869557

FG VER: (1.3) 2474:20070501/ 1869557/2528

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