Doc # 2007166861
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SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$0.00

786230/1579

DIVISION OF CHILD SUPPORT PO Box 11520 Tacoma, WA 98411-5520

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

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: Anthony S. Ph	elps		, also known as or
doing business as: ANTHONY M PHE	LPS		<u> </u>
TONY RICHARD	S		
SSN:xxx-xx-06	559	DOB: <u>11/11/72</u>	<u> </u>
Grantee or Creditor: The Departmer	it of Social and I	lealth Services (DSHS)	
Legal Description:		7	- 1
The state of the s	"		\sim
Assessor's Property Tax Parcel Acco	ount Number:		
Child support payments, not paid wh DSHS claims that the debtor named Support (DCS) files a lien in the amo	above owes pas	t-due child support. Th	e Division of Child
All real and personal property of	the debtor name	ed above except Tribal 3	Frust property
Only the property described in th			· ·
July 11, 2007	M. White		
Date	Authorized Repre	esentative HLD SUPPORT	
(360) 696-6100	M. White		
Telephone Number	Person to Contac	ct	
		0000786230002	5316120000000322502
In reply, refer to: Case #: 786230 1029561 126015'	7 1106308 90	2717	
Case #. 700230 1029361 120013	, 1100300 30	F	G VER: (1.3) 3083:20070711/