Doc # 2007167664

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Date: 09/12/2007 03:08P

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

doing business as:	evin L. Palodichuk	, also	MIOWII as OI
duling business as			',
S	SN: <u>XXX-XX-714</u> 5	DOB: <u>05/02/78</u>	
Grantee or Creditor:	The Department of Social and H	ealth Services (DSHS).	1
Legal Description:		7	
	()		N
Assessor's Property	Tax Parcel Account Number:		
DSHS claims that the	nts, not paid when due, are judge debtor named above owes pasi lien in the amount of \$ 4,893.	t-due child support. The Divisi	
X All real and perso	onal property of the debtor name	d above except Tribal Trust pr	operty.
Only the property	described in the Legal Descripti	ion section above.	
September 08, 20	M. Combs		
Date .	Authorized Repre		
(360) 696-6100	M. Combs	· · · · · · · · · · · · · · · · · · ·	
Telephone Number	Person to Contac	t	
		000147101200445936800	000000122502

In reply, refer to: Case #: 1471012

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.3) 2639:20070908/ 1471012/2639