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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: Patrick L. Mudoing business as:	rphy , also known as or ,
SSN:xxx-xx-98	DOB: 08/08/86
Grantee or Creditor: The Departmen	t of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Acco	unt Number:
	en due, are judgments and accrue to the lien amount.  above owes past-due child support. The Division of Child  unt of \$ 1,165.00 in Skamania County on:
	the debtor named above except Tribal Trust property.  Legal Description section above.
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	J. Demich
Telephone Number	Person to Contact
In reply, refer to:	000200190900537715300000000012502

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

Case #: 2001909 2038311

FG VER: (1.3) 3520:20071218/ 2001909/3520