Dc # 2008168751 Page 1 of 1 Date: 1/18/2008 11:53A
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: Michael J. L	um		, also known as or
doing business as:			,
SSN: <u>xxx-x</u> x-7	150	DOB: 11/01/61	
Grantee or Creditor: The Departme	nt of Social and He	alth Services (DSHS).	
Legal Description:)),	•	
Assessor's Property Tax Parcel Acc	ount Number:		
Child support payments, not paid who DSHS claims that the debtor named Support (DCS) files a lien in the amount of the control	above owes past-	due child support. The	Division of Child
X All real and personal property of	the debtor named	above except Tribal T	rust property.
Only the property described in the	ne Legal Descriptio	n section above.	
January 15, 2008	E. Shipley		_
Date	Authorized Repres		
(360) 664-6900	E. Shipley		
Telephone Number	Person to Contact		-

In reply, refer to: Case #: 1379990 1802698

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

00013799900042856950000000222502

FG VER: (1.3) 1447:20080115/ 1379990/1447