Doc # 200816881
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Date: 2/1/2008 02:10P
Filed by: DEPI OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$0.06

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: Bridget I. Spur	rgeon	, also known as or
doing business as:	~(~ \ ~\~	,
SSN: xxx-xx-047	DOB: <u>03/16/8</u> 0	,)
Grantee or Creditor: The Department of	of Social and Health Services (DS	HS).
Legal Description:		~~
Assessor's Property Tax Parcel Accoun	nt Number:	7.
Child support payments, not paid when DSHS claims that the debtor named ab Support (DCS) files a lien in the amount	oove owes past-due child support.	The Division of Child
All real and personal property of th	e debtor named above except Trib	oal Trust property.
Only the property described in the	Legal Description section above.	
January 29, 2008 Date	K. Strobel Authorized Representative DIVISION OF CHILD SUPPORT	
(425) 438-4800	K. Strobel	
Telephone Number	Person to Contact	4 B B 4 182 15 16 17 17 17 17 17 17 17

In reply, refer to: Case #: 1942523 00019425230051964480000000102502

FG VER: (1.3) 2285:20080129/ 1942523/2285

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