Doc # 2008169112
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Date: 2/27/2008 12:04P
Filed by: DEPT OF SOCIAL & HEALTH SVCS
Filed & Recorded in Official Records
of SKAMANIA COUNTY
SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON
Fee: \$0.08

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: Nick	Calutoiu	.77	4.7	also known as or
doing business as:		4.		,
				,
SSN:	XXX-XX-2734	DOB	3: 07/23/49	
Grantee or Creditor: The	Department of Social	and Health S	ervices (DSHS).	- 1
Legal Description:	O			1
Assessor's Property Tax	Parcel Account Numb	er:		<u> </u>
Child support payments, I DSHS claims that the deb Support (DCS) files a lien	otor named above owe	es past-due ch	nild support. The I	
All real and personal				-
Only the property des	scribed in the Legal De	escription sect	ion above.	,
February 25, 2008	J. Der	nich		
Date		d Representative		
(360) 696-6100	J. Dem	nich		
Telephone Number	Person to	Contact		
			0002043315005437	72770000000012502

In reply, refer to: Case #: 2043315

> FG VER: (1.3) 3520:20080225/ 2043315/3520

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