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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: Jamie D. E	soyce		also known as or
doing business as: JAMIE D SI	MMONS		, , , , , , , , , , , , , , , , , , , ,
JAMIE D FF	RICK		,
SSN: xxx-xx	ζ-5964	DOB: 11/08/77	·
Grantee or Creditor: The Depart	ment of Social and He	alth Services (DSHS).	- 1
Legal Description:	\mathcal{O}_{F}		N
Assessor's Property Tax Parcel	Account Number:		
Child support payments, not paid DSHS claims that the debtor nar Support (DCS) files a lien in the	ned above owes past-	due child support. The	lien amount. Division of Child County on:
X All real and personal propert	y of the debtor named	above except Tribal Tr	ust property.
Only the property described	in the Legal Description	n section above.	
February 25, 2008 Date	J. Demich Authorized Repres		
(360) 696-6100	J. Demich		
Telephone Number	Person to Contact		
		00020002300053	587310000000042502
In reply, refer to: Case #: 2000230			

FG VER: (1.3) 3520:20080225/ 2000230/3520

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