AFN #2008169699 Recorded 04/24/08 at 01:00 PM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor J. Michael Garvison Skamania County, WA

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: doing business as:	Christophe J.	Gabriel	, also known as or
•			,
	SSN: <u>xxx-xx-490</u>	DOB: 02/04/	86
Grantee or Credito	r: The Department	of Social and Health Services ([OSHS).
Legal Description:),	
Assessor's Propert	y Tax Parcel Accou	nt Number:	
DSHS claims that t		n due, are judgments and accrue pove owes past-due child support of \$ 538.45 in Skar	rt. The Division of Child
X All real and per	rsonal property of th	e debtor named above except T	ribal Trust property.
Only the prope	rty described in the	Legal Description section above).
April 21, 2008		R. Belton	
Date		Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100		R. Belton	· · · · · · · · · · · · · · · · · · ·
Telephone Number		Person to Contact	
		00019:	2062700411542400000000122502

In reply, refer to: Case #: 1920627

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.3) 3822:20080421/ 1920627/3822