AFN #2008169726 Recorded 04/28/08 at 01:15 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:	Jeffrey D. Broy	vn .		, also known as or
doing business as:				,
_			74.	
	SSN: <u>xxx-xx-008</u>	2 [	OOB: <u>03/02/64</u>	<u> </u>
Grantee or Creditor	r: The Department	of Social and Heal	th Services (DSHS).	<b>\</b>
Legal Description:		)`	_(	13
Assessor's Propert	y Tax Parcel Accou	nt Number:	$\triangle$	
DSHS claims that t	he debtor named ab	ove owes past-du	nts and accrue to the ue child support. The 6 in Skamania	Division of Child
X All real and per	rsonal property of th	e debtor named a	bove except Tribal T	rust property.
☐ Only the prope	rty described in the	Legal Description	section above.	
April 19, 2008 Date	<u> </u>	K. Stubbs Authorized Represent DIVISION OF CHILD		<u>:</u>
(425) 438-4800	·	K. Stubbs		
Telephone Number		Person to Contact		
			00012895700041	12166800000000212502

In reply, refer to: Case #: 1289570 FG VER: (1.3) 4642:20080419/

1289570/4642

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