AFN #2008169751 Recorded 04/30/08 at 12:58 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: Dennis	s C. Schuler		_, also known as or
doing business as:		+-	;
SSN: X	XX-XX-8652	DOB: 01/09/63	
Grantee or Creditor: The D	Department of Social a	and Health Services (DSHS)).
Legal Description:	\mathcal{O}	` _(
Assessor's Property Tax P	arcel Account Numbe	er:	
DSHS claims that the debt	or named above owes	judgments and accrue to the spast-due child support. The in Skamania	ne Division of Child
X All real and personal p	roperty of the debtor r	named above except Tribal ⁻	Trust property.
Only the property desc	ribed in the Legal Des	scription section above.	
April 26, 2008	T. Hanl	ke	
Date		Representative OF CHILD SUPPORT	
(360) 696-6100	T. Hanl	ke	
Telephone Number	Person to 0	Contact	
		000204635400.	5442675000000000032502

In reply, refer to: Case #: 2046354

FG VER: (1.3) 3939:20080426/ 2046354/3939

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