AFN #2008170207 Recorded 06/18/08 at 01:37 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:	Kelly G. Govro	<u>a 160 1</u>		, also known as or
doing business as:				, , , , , , , , , , , , , , , , , , ,
-				,
	SSN: <u>xxx-xx-7752</u>		DOB: <u>04/23/68</u>	
Grantee or Credito	r: The Department of	Social and Hea	th Services (DSH	IS).
Legal Description:)`	_(17
Assessor's Propert	y Tax Parcel Accoun	t Number:		
DSHS claims that t	nents, not paid when he debtor named abo s a lien in the amount	ove owes past-du	ue child support.	The Division of Child
X All real and per	sonal property of the	debtor named a	bove except Triba	al Trust property.
☐ Only the prope	rty described in the L	egal Description	section above.	
June 16, 2008 Date	7	S. Berry Authorized Represen DIVISION OF CHILD		
(360) 696-6100		S. Berry		
Telephone Number	F	Person to Contact		
			0001954830	00529644900000062502

In reply, refer to: Case #: 1954830

FG VER: (1.3) 3818:20080616/ 1954830/3818

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