AFN #2008170216 Recorded 06/19/08 at 02:36 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

In reply, refer to:

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

Case #: 2065750 2065752 2065753 1584664 2071239

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor:	Francisco Ra	mos		, also known as or
doing business as:	FRANCISCO I	RAMOS-VILLA		5
		M. P		,
	SSN: <u>xxx-xx-98</u>	376	DOB: <u>10/10/71</u>	<u> </u>
Grantee or Credito	r: The Departmer	nt of Social and H	lealth Services (DSH	IS).
Legal Description:),	_))
Assessor's Proper	ty Tax Parcel Acc	ount Number:		·
	the debtor named	above owes pas		The Division of Child
X All real and pe	rsonal property of	the debtor name	d above except Triba	al Trust property.
Only the prope	erty described in th	e Legal Descript	ion section above.	
June 17, 2008		P. Stevens		
Date		Authorized Repre		
(360) 696-6100)	P. Stevens		
Telephone Number		Person to Contac	t	

FG VER: (1.3)

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