AFN #2008170521 Recorded 07/23/08 at 11:48 AM 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:	Kenneth J. Fry			_, also known a	s or
doing business as:					_,
					_'
	SSN: <u>XXX-XX-566</u>	,	DOB: <u>02/03/56</u>		•
Grantee or Creditor	: The Department o	of Social and Heal	ith Services (DSHS)		
Legal Description:) `	~		
Assessor's Propert	y Tax Parcel Accour	nt Number:			
DSHS claims that the	he debtor named ab	ove owes past-du	nts and accrue to thue child support. The in Skamania	e Division of Ch	nild nty on:
X All real and per	sonal property of the	e debtor named a	bove except Tribal	Trust property.	
Only the proper	rty described in the	_egal Description	section above.		
July 20, 2008		A. Pearson		4,	
Date		Authorized Represen DIVISION OF CHILD		ti.	
(360) 664-6900		A. Pearson			
Telephone Number		Person to Contact			
In reply, refer to:			0000603540007	18066350000000033256	

In reply, refer to: Case #: 603540

FG VER: (1.3) 4068:20080720/ 603540/4068

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