AFN #2008170939 Recorded 09/08/08 at 11:37 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

	Sean D. William	ns		, also kno	wn as or
doing business as:					,
` .	SSN: <u>xxx-xx-516</u>	2	DOB: <u>10/25/76</u>		
Grantee or Creditor	r: The Department	of Social and Hea	ith Services (DSHS).	4	N .
Legal Description:),	_(5	3
Assessor's Propert	y Tax Parcel Accou	nt Number:	\sim		
DSHS claims that t		ove owes past-d	ents and accrue to the ue child support. The in Skamania	e Division	
X All real and per	sonal property of the	e debtor named	above except Tribal T	rust prope	rty.
Only the proper	rty described in the	Legal Description	section above.		
September 03,	2008	J. Roppo			
Date		Authorized Represe DIVISION OF CHILE		,	
(253) 922-0454	· ·	J. Roppo			
Telephone Number	- '::	Person to Contact			
		·			

In reply, refer to: Case #: 1910535

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

FG VER: (1.3) 3170:20080903/ 1910535/3170