AFN #2008171056 Recorded 09/24/08 at 11:34 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: Chr:	stian Chamber	lin	, also known as or
doing business as:			
l-trtytalliton			,
SSN	:XXX-XX-5963	DOB: <u>09/23/78</u>	
Grantee or Creditor: Th	e Department of Soc	cial and Health Services (DSF	I S).
Legal Description:	(U)	` _ (
Assessor's Property Tax	Parcel Account Nu	mber:	<u> </u>
DSHS claims that the de	ebtor named above o	are judgments and accrue to owes past-due child support. 6,920.67 in Skaman	The Division of Child
X All real and persona	I property of the deb	tor named above except Triba	al Trust property.
Only the property de	scribed in the Legal	Description section above.	
September 20, 2008 Date	Autho	Voodworth rized Representative ION OF CHILD SUPPORT	
(360) 696-6100	<u>s. v</u>	Woodworth	
Telephone Number	Perso	n to Contact	
		A CONTRACTOR OF THE CONTRACTOR	

In reply, refer to: Case #: 2055566

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

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FG VER: (1.3) 3816:20080920/ 2055566/3816