AFN #2008171222 Recorded 10/15/08 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:	Rickey F. Turn	er		_, also known as or
doing business as:	RICKEY F TURNE	R		·
				7
	SSN: <u>XXX-XX-588</u>	8	OOB: <u>07/08/69</u>	
Grantee or Credito	r: The Department	of Social and Healt	th Services (DSHS)	- 1 -
Legal Description:),	_(17
Assessor's Propert	ty Tax Parcel Accou	nt Number:		
DSHS claims that t	nents, not paid wher the debtor named at s a lien in the amour	oove owes past-du	e child support. The	e Division of Child
X All real and per	rsonal property of th	e debtor named ab	oove except Tribal T	rust property.
Only the prope	rty described in the	Legal Description :	section above.	
October 12, 20	80	A. Cullen		
Date		Authorized Represent DIVISION OF CHILD		
(360) 696-6100)	A. Cullen		
Telephone Number		Person to Contact		

In reply, refer to: Case #: 1597862

FG VER: (1.3) 3083:20081012/ 1597862/3083

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