AFN #2008171269 Recorded 10/22/08 at 11:44 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:	Philip E. Thro	w		, also known as or
doing business as:	·		\ _	,
	SSN: <u>xxx-xx-782</u>	6	DOB: <u>12/27/65</u>	
Grantee or Credito	r: The Department	of Social and He	alth Services (DSHS).	- N
Legal Description:	\sim C),	-C	13
Assessor's Propert	ty Tax Parcel Accou	nt Number:	\sim	
DSHS claims that t		bove owes past-o	ents and accrue to the due child support. The 19 in Skamania	Division of Child
X All real and per	rsonal property of th	e debtor named	above except Tribal T	rust property.
☐ Only the prope	erty described in the	Legal Descriptio	n section above.	
October 18, 20	008	L. Dhanens	<u></u>	
Date		Authorized Represe		
(360) 696-6100)	L. Dhanens	· · · · · · · · · · · · · · · · · · ·	
Telephone Number		Person to Contact		

In reply, refer to: Case #: 2088826

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

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FG VER: (1.3) 1314:20081018/ 2088826/1314