AFN #2008171474 Recorded 11/14/08 at 11:04 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: Muriel R. Clordoing business as:	nd , also known as or ,
	,
SSN: <u>xxx-xx-77</u>	24 DOB: 03/14/71 .
Grantee or Creditor: The Department	t of Social and Health Services (DSHS).
Legal Description:), ()
Assessor's Property Tax Parcel Acco	unt Number:
DSHS claims that the debtor named a	en due, are judgments and accrue to the lien amount. above owes past-due child support. The Division of Child Int of \$ 1,194.00 in Skamania County on
All real and personal property of t	he debtor named above except Tribal Trust property.
Only the property described in the	Legal Description section above.
November 11, 2008	D. Goodwin
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	D. Goodwin
Telephone Number	Person to Contact
	000206205800312753500000000112502

In reply, refer to: Case #: 2062098

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

FG VER: (1.3) 3739:20081111/ 2062098/3739