AFN #2009171863 Recorded 01/15/09 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:	Robert W. Tubb	s		, also kn	own as or
doing business as:					
					,
	SSN: <u>xxx-xx-681</u>	4	DOB: 05/10/80) 	
Grantee or Credito	r: The Department	of Social and He	alth Services (DSI	HS).	
Legal Description:		"	- (7	7
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	pove owes past-d	lue child support.	The Division	
X All real and per	rsonal property of th	e debtor named	above except Trib	al Trust prop	erty.
☐ Only the prope	rty described in the	Legal Description	section above.		
January 13, 20	109	D. Goodwin	r		
Date	Charles and was a construct a better abbetter district and an	Authorized Represe DIVISION OF CHILL		alamangan na quan-naquing magain na harangan na harangan na harangan na harangan na harangan na harangan na haranga	And a seal of the
(360) 696-6100)	D. Goodwin			
Telephone Number	0000 000000000000000000000000000000000	Person to Contact			
			000208333	90018950880000	000013502

In reply, refer to: Case #: 2083339

FG VER: (1.3) 3739:20090113/ 2083339/3739

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