

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: Jacob Sams, also known as or
doing business as: _____

SSN: xxx-xx-8536 DOB: 12/17/80

Grantee or Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

Assessor's Property Tax Parcel Account Number: _____

Child support payments, not paid when due, are judgments and accrue to the lien amount.
DSHS claims that the debtor named above owes past-due child support. The Division of Child
Support (DCS) files a lien in the amount of \$ 1,242.00 in Skamania County on:

- ☒ All real and personal property of the debtor named above except Tribal Trust property.
☐ Only the property described in the Legal Description section above.

March 26, 2009
Date

(360) 696-6100
Telephone Number

R. Opoka
Authorized Representative
DIVISION OF CHILD SUPPORT
R. Opoka
Person to Contact



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In reply, refer to:
Case #: 2064350