AFN #2009172482 Recorded 04/06/09 at 02:23 PM 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: Rafik M.	Hanna		, aíso í	known as or
doing business as:				, j
SSN: XXX-	·XX-8736	DOB: <u>08</u>	/01/60	· · · · · · · · · · · · · · · · · · ·
Grantee or Creditor: The Dep	artment of Social a	ınd Health Servic	ces (DSHS).	
Legal Description:	O	•	0	7
Assessor's Property Tax Parc	el Account Number	-		
Child support payments, not p DSHS claims that the debtor n Support (DCS) files a lien in th	named above owes	past-due child s	support. The Divisi	
X All real and personal prope	erty of the debtor n	amed above exc	cept Tribal Trust pr	operty.
Only the property describe	ed in the Legal Des	cription section a	above.	
April 01, 2009	J. Mend			
Date		Representative OF CHILD SUPPORT	Г	
(360) 696-6100	J. Mend	loza		
Telephone Number	Person to C	ontact		

In reply, refer to: Case #: 1735025

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) 00017350250049376860000000122502

FG VER: (1.3) 3081:20090401/ 1735025/3081