AFN #2009173194 Recorded 06/24/09 at 03:22 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:	Justin R. Hall	4 34 3		, also known as or
doing business as:				,
				1
	SSN: XXX-XX-617	0	DOB: <u>05/10/85</u>	
Grantee or Credito	r: The Department	of Social and He	ealth Services (DSHS).	~ \
Legal Description:),	_(17
Assessor's Propert	ty Tax Parcel Accou	int Number:		
DSHS claims that t		bove owes past-o	ents and accrue to the due child support. The 14 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.	
June 20, 2009		E. Wilson	<i>y</i>	
Date		Authorized Represe DIVISION OF CHIL		
(360) 696-6100)	E. Wilson		
Telephone Number		Person to Contact		
		,		

In reply, refer to:

Case #: 1976953 2024937

00019769530026779220000000362502

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

FG VER: (1.3) 2370:20090620/ 1976953/2370