AFN #2009173230 Recorded 06/29/09 at 04:47 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:	Blaine A. Sanc	hez		_, also known as or
doing business as:				<b>•</b>
	-			,
	SSN: XXX-XX-715	70	DOB: 08/12/79	
Grantee or Credito	r: The Department	of Social and Hea	lth Services (DSHS)	
Legal Description:		"	~	17
Assessor's Proper	ty Tax Parcel Accou	nt Number:		
DSHS claims that	the debtor named at	oove owes past-d	nts and accrue to the ue child support. The in Skamania	e Division of Child
X All real and pe	rsonal property of th	e debtor named a	bove except Tribal T	rust property.
Only the prope	erty described in the	Legal Description	section above.	
June 22, 2009		T. Mason		
Date	and a second a second and a second a second and a second	Authorized Represer DIVISION OF CHILD		anguagement of the state of the
(360) 664-6900	)	T. Mason		
Telephone Number		Person to Contact		

In reply, refer to: Case #: 1462691 1537110

FG VER: (1.3) 4017:20090622/ 1462691/4017

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