AFN #2009173741 Recorded 08/27/09 at 11:19 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:	Kitty L. Jones		, also known as or
doing business as:			*
<u></u>			,
;	SSN: <u>xxx-xx-468</u> 7	DOB: 03/11/61	·
Grantee or Creditor:	The Department o	f Social and Health Services (DSH	S).
Legal Description:), (17
Assessor's Property	/ Tax Parcel Accoun	t Number:	
DSHS claims that th	ne debtor named abo	due, are judgments and accrue to tove owes past-due child support. Tof\$ 20,577.00 in Skamani	he Division of Child
X All real and pers	sonal property of the	debtor named above except Triba	Trust property.
☐ Only the proper	ty described in the L	egal Description section above.	
August 25, 2009	€	J. Demich	
Date		Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 696-6100	1	J. Demich	v.
Telephone Number		Person to Contact	
In reply, refer to:		00014500630	0385381300000000352502

Case #: 1650063

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

FG VER: (1.3) 3520:20090825/ 1650063/3520