AFN #2009173869 Recorded 09/14/09 at 04:49 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: doing business as:	Jeffrey W. Lee		, a	also known as or
-	S\$N: xxx-xx-519	4 DO	B: 08/19/64	
Grantee or Credito	r: The Department	of Social and Health		
Legal Description:	y Tax Parcel Accou	nt Number	~C	7
Child support paym DSHS claims that t	nents, not paid wher the debtor named at	n due, are judgments pove owes past-due on t of \$ 8,838.00	child support. The D	
		e debtor named abov Legal Description sec		st property.
September 09, Date	2009	J. Demich Authorized Representativ DIVISION OF CHILD SUI		
(360) 696-6100)	J. Demich		
Telephone Number		Person to Contact	0002152421005610	5780000000012502

In reply, refer to: Case #: 2152421

FG VER: (1.3) 3520:20090909/ 2152421/3520

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