

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: Bobby M. Brown, also known as or
doing business as: _____

SSN: xxx-xx-2612 DOB: 09/03/78

Grantee or Creditor: The Department of Social and Health Services (DSHS).

Legal Description:

Assessor's Property Tax Parcel Account Number: _____

Child support payments, not paid when due, are judgments and accrue to the lien amount.
DSHS claims that the debtor named above owes past-due child support. The Division of Child
Support (DCS) files a lien in the amount of \$ 776.27 in Skamania County on:

- ☒ All real and personal property of the debtor named above except Tribal Trust property.
☐ Only the property described in the Legal Description section above.

September 14, 2009
Date

(206) 341-7000
Telephone Number

J. Hammett
Authorized Representative
DIVISION OF CHILD SUPPORT
J. Hammett
Person to Contact



00021340180055836820000000062502

In reply, refer to:
Case #: 2134018