AFN #2010174666 Recorded 01/07/10 at 11:46 AM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Timothy O. Todd Skamania County,

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:	Mark A. Tubbs	, also known as or
doing business as:		,
 -		,
	SSN: <u>XXX-XX-205</u>	9 DOB: <u>11/12/73</u> .
Grantee or Credito	r: The Department	of Social and Health Services (DSHS).
Legal Description:	\sim), (1)
Assessor's Proper	ty Tax Parcel Accour	nt Number:
DSHS claims that I	the debtor named ab	n due, are judgments and accrue to the lien amount. pove owes past-due child support. The Division of Child t of \$ 2,352.00 in Skamania County on
X All real and pe	rsonal property of the	e debtor named above except Tribal Trust property.
☐ Only the prope	rty described in the	Legal Description section above.
January 05, 20	10	W. Cowley
Date		Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100)	W. Cowley
Telephone Number		Person to Contact
		00020169450038897810000000602502

In reply, refer to: Case #: 2016945

FG VER: (1.3) 2544:20100105/ 2016945/2544

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