AFN #2010174709 Recorded 01/14/10 at 01:29 PM 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: Paul L. Morgan	, also known as or
doing business as:	
	,
SSN: <u>xxx-xx-724</u>	DOB: <u>06/11/64</u>
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:), (0,)
Assessor's Property Tax Parcel Accou	ınt Number:
DSHS claims that the debtor named a	n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child nt of \$ 33,319.00 in Skamania County on
X All real and personal property of the	ne debtor named above except Tribal Trust property.
Only the property described in the	Legal Description section above.
January 12, 2010 Date	D. Falkner Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	D. Falkner
Telephone Number	Person to Contact
	000202698100541100800000000102502

In reply, refer to: Case #: 2026951

FG VER: (1.3) 4356:20100112/ 2026951/4356

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