AFN #2010176743 Recorded 11/01/10 at 10:09 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: DARREL MATTHEW	TALLMADGE, also known as or
doing business as:	,
SSN: <u>xxx-xx-234</u>	9 DOB: <u>05/13/1965</u> .
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	), (1)
Assessor's Property Tax Parcel Account	nt Number:
	n due, are judgments and accrue to the lien amount.  bove owes past-due child support. The Division of Child  of \$ 28,528.00 in SKAMANIA County on:
X All real and personal property of the	e debtor named above except Tribal Trust property.
$\square$ Only the property described in the	Legal Description section above.
October 26, 2010	J DEMICH
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	J DEMICH
Telephone Number	Person to Contact

In reply, refer to: Case #: 1879141

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

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