AFN #2010177379 Recorded 12/30/10 at 12:56 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: MARTHA B JENK.	.NS, also known as or
doing business as: MARTHA B WARD	,
SSN: <u>xxx-xx-73</u> :	20 DOB:
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:), ()
Assessor's Property Tax Parcel Accord	unt Number:
	n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child nt of \$ 707.10 in SKAMANIA County on:
X All real and personal property of t	he debtor named above except Tribal Trust property.
☐ Only the property described in the	Legal Description section above.
December 28, 2010 Date	T HANKE Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	T HANKE
Telephone Number	Person to Contact

In reply, refer to: Case #: 2139134

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

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