AFN #2011178096 Recorded 04/20/2011 at 11:38 AM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Timothy O. Todd Skamania County, WA

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: JOSHUA SAMUEI	, also known as or
doing business as: G MOE MURRAY	
SSN: <u>xxx-xx-4</u>	DOB: 06/04/1974
Grantee or Creditor: The Department	nt of Social and Health Services (DSHS).
Legal Description:), ()
Assessor's Property Tax Parcel Acce	ount Number:
DSHS claims that the debtor named	nen due, are judgments and accrue to the lien amount. above owes past-due child support. The Division of Child bunt of \$ 29,520.88 in SKAMANIA County on
X All real and personal property of	the debtor named above except Tribal Trust property.
☐ Only the property described in the	ne Legal Description section above.
April 18, 2011 Date	R EVANS Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	R EVANS
Telephone Number	Person to Contact
	00010392710034407160000000772502

In reply, refer to:

Case #: 1039271 1357231 2064331 1416554

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 4098:04182011/ 1039271 / 4098