AFN #2011178323 Recorded 05/26/2011 at 11:59 AM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Timothy 0. 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 JAMES I	IALL, also known as or
doing business as: JOSHUA F HALL	
JOSHUA D HALL	,
SSN: <u>xxx-xx-14</u>	DOB: 06/16/1977
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	), ()
Assessor's Property Tax Parcel Accord	unt Number:
	en due, are judgments and accrue to the lien amount.  Above owes past-due child support. The Division of Child  Int of \$ 777.77 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.
May 24, 2011	J DEMICH
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	J DEMICH
Telephone Number	Person to Contact
	00022881350058304380000000012502

In reply, refer to: Case #: 2288135

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 3520:05242011/

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