AFN #2011178676 Recorded 07/20/2011 at 12:54 PM 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: MARK DEWITT MO	CLURG, also known as or
doing business as:	
SSN: <u>xxx-xx-649</u>	DOB: <u>03/13/1963</u> .
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:), ()
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 \$ 1,212.00 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.
July 11, 2011	J DEMICH
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	J DEMICH
Telephone Number	Person to Contact

In reply, refer to: Case #: 1619017

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) 000161901700473605300000000162502

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