AFN #2011179011 Recorded 09/08/2011 at 02:19 PM 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: TUAN VAN TRAN doing business as:	, also known as or
SSN: <u>xxx-xx-32</u> :	DOB: <u>05/11/1967</u> .
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	), (0)
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 \$ 70,914.00 in SKAMANIA County on
All real and personal property of t	ne debtor named above except Tribal Trust property.
Only the property described in the	Legal Description section above.
September 07, 2011 Date	J DEMICH Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	J DEMICH
Telephone Number	Person to Contact

In reply, refer to: Case #: 1569935

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

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