AFN #2011179055 Recorded 09/19/2011 at 07:52 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: doing business as:	JEFFREY H HULL		, also known as or
	SSN: <u>xxx-xx-348</u>	DOB: <u>10/19/1</u>	984
Grantee or Credito	r: The Department	of Social and Health Services (DS	SHS).
Legal Description:)` (22
Assessor's Propert	y Tax Parcel Accou	nt Number:	
DSHS claims that t	he debtor named ab	due, are judgments and accrue to ove owes past-due child support tof \$ 2,500.00 in SKAMP	. The Division of Child
		e debtor named above except Tri Legal Description section above.	bal Trust property.
September 12,		D AMICARELLA-SOHNS Authorized Representative DIVISION OF CHILD SUPPORT	
(206) 341-7000	l	D AMICARELLA-SOHNS	
Telephone Number		Person to Contact	
		0002319:	33200587995300000000012502

In reply, refer to: Case #: 2319332

FG VER: (1.4) 566:09122011/ 2319332 / 566

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