AFN #2012179939 Recorded 01/30/2012 at 01:32 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:	STACY M MARSENO	GILL		, also known as or
doing business as:			$\rightarrow$	
	SSN: <u>xxx-xx-359</u>	3 DOB:	05/09/1986	
Grantee or Credito	r: The Department o	of Social and Health Se	rvices (DSHS).	
Legal Description:			U'	
Assessor's Propert	y Tax Parcel Accou	nt Number:	<u> </u>	
DSHS claims that t		due, are judgments an nove owes past-due chil nt of \$ 1,450.00		
		e debtor named above Legal Description section	46.00	rust property.
January 17, 20 Date	12	M SULLIVAN Authorized Representative DIVISION OF CHILD SUPPO	ORT	<del></del>
(253) 597-3700		M SULLIVAN		<b></b>
In reply refer to:		Person to Contact	00023265590020	436940000000062502

In reply, refer to: Case #: 2326559

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 4197:01172012/ 2326559 / 4197