AFN #2012180509 Recorded 04/23/2012 at 12:50 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: VINCENT REECH	3		, also known as or
doing business as:			
-		- Y	$\mathbf{P}\mathbf{A}$
SSN: <u>xxx-xx-2</u>	591	DOB: 10/19/1984	
Grantee or Creditor: The Department of Social and Health Services (DSHS).			
Legal Description:	C.C.		
Assessor's Property Tax Parcel Acce	ount Number:		4
Child support payments, not paid who DSHS claims that the debtor named Support (DCS) files a lien in the amount of the control	above owes past-	due child support. The	e lien amount. Division of Child County on:
All real and personal property of			
☐ Only the property described in the	e Legal Descriptio	n section above.	N
April 18, 2012	J HEMBROFF		
Date	Authorized Represe		
(253) 597-3700	J HEMBROFF		.
Telephone Number	Person to Contact		*
		00023492880059	2981200000000032502
In reply, refer to:		7	

Case #: 2349288

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 3652:04182012/ 2349288 / 3652