AFN #2012180611 Recorded 05/07/2012 at 03:46 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: ROBERT JOHN HA	MILTON , also known as or
doing business as:	
SSN: <u>xxx-xx-051</u>	3 DOB: <u>01/15/1964</u> .
Grantee or Creditor: The Department of Social and Health Services (DSHS).	
Legal Description:	
Assessor's Property Tax Parcel Account	nt Number: ·
	n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child nt of \$ 2,008.24 in SKAMANIA County on:
All real and personal property of the debtor named above except Tribal Trust property.	
Only the property described in the Legal Description section above.	
May 01, 2012	B MUNOZ-ERWIN
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	B MUNOZ-ERWIN
Telephone Number	Person to Contact
In reply, refer to: Case #: 2101409 2120573	00021014090021676680000000342502
NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001)	FG VER: (1.4) 2133:05012012/ 2101409 / 2133