AFN #2012182272 Recorded 12/13/2012 at 01:16 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: CHRISTINE N	STIEF , also known as or
doing business as:	
SSN: xxx-xx-c	719 DOB: 03/12/1986 .
Grantee or Creditor: The Departme	nt of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Acc	ount Number:
	hen due, are judgments and accrue to the lien amount.  I above owes past-due child support. The Division of Child count of \$ 1,231.86 in SKAMANIA County on:
All real and personal property of	f the debtor named above except Tribal Trust property.
☐ Only the property described in t	he Legal Description section above.
December 11, 2012	R WASHINGTON
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(509) 363-5000	R WASHINGTON
Telephone Number	Person to Contact
	00023766520017806780000000052502
In reply, refer to:	

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

2376652

Case #:

FG VER: (1.4) 1177:12112012/ 2376652 / 1177