AFN #2012182385 Recorded 12/31/2012 at 10:17 AM 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

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

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND STATEMENT OF LIEN

Grantor or Debtor: MICHAEL WAYNE	HENERY	also known as or
doing business as:		
SSN: <u>XXX-XX-146</u>	DOB: 03/28/1979	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		
Assessor's Property Tax Parcel Accou	ınt Number:	
	n due, are judgments and accrue to the bove owes past-due child support. The nt of \$ 5,994.00 in SKAMANIA	
★ All real and personal property of theOnly the property described in the	ne debtor named above except Tribal Tr Legal Description section above.	ust property.
December 26, 2012 Date	J GARRETT Authorized Representative DIVISION OF CHILD SUPPORT	/
(360) 696-6100 Telephone Number	J GARRETT Person to Contact	
In reply, refer to: Case #: 1869944 2019797	00018699440044	9194000000000462502

FG VER: (1.4)

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