AFN #2013000416 Recorded 03/04/2013 at 02:10 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: GARRETT ELLIS	, also known as or
doing business as:	
SSN: <u>xxx-xx-81</u>	DOB: <u>03/26/1972</u>
Grantee or Creditor: The Departmen	nt of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Acco	ount Number:
Child support payments, not paid who DSHS claims that the debtor named support (DCS) files a lien in the amount	en due, are judgments and accrue to the lien amount. above owes past-due child support. The Division of Child unt of \$ 2,840.04 in SKAMANIA County on:
	the debtor named above except Tribal Trust property. e Legal Description section above.
February 25, 2013 Date	T MED ZIMMERMAN Authorized Representative DIVISION OF CHILD SUPPORT
(253) 597-3700	T MED ZIMMERMAN
In reply, refer to:	Person to Contact 00023712160059648170000000012502
m ropig, roloi to.	

Case #: 2371216

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 3050:02252013/ 2371216 / 9099