AFN #2013001392 Recorded 07/01/2013 at 04:58 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

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: ANNA-ROSE D HOLMES				, also known as or
doing business as	ANNA ROSE BIEM	OLD		
	ANNA D HOLMES		Y .	
	SSN: <u>xxx-xx-384</u>	ł 0	DOB: <u>04/27/1978</u>	
Grantee or Creditor: The Department of Social and Health Services (DSHS).				
Legal Description:		دنک		
Assessor's Property Tax Parcel Account Number:				
Child support payments, not paid when due, are judgments and accrue to the lien amount. DSHS claims that the debtor named above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 4,902.80 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.				
June 24, 2013		J DEMICH		, ,
Date	" "	Authorized Represe DIVISION OF CHILI	ntative O SUPPORT	
(360) 696-6100)	J DEMICH		
Telephone Number		Person to Contact		
In reply, refer to:	(00024238950057	79613100000000102502
Case #: 2423895	5			
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