AFN #2013001461 Recorded 07/10/2013 at 02:14 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:	JANET GAYLE THOMPSON			, also known as or
doing business as:				
			Y .	
	SSN: <u>XXX-XX-1448</u>	3	DOB: <u>10/20/1967</u>	
Grantee or Credito	r: The Department o	of Social and Hea	lth Services (DSHS).	
Legal Description:		- 49	( 4)	b-
		. 6. 4		
		<i>•</i> W `		
	1			
Assessor's Propert	y Tax Parcel Accour	nt Number:		
DSHS claims that t		ove owes past-d	nts and accrue to the ue child support. The in SKAMANIA	
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All real and per	rsonal property of the	e debtor named a	bove except Tribal T	rust property.
☐ Only the prope	rty described in the I	egal Description	section above.	A 1
July 02, 2013		T CASUCCIO		, -
Date	A	Authorized Represer DIVISION OF CHILD		
(425) 438-4800		T CASUCCIO		
Telephone Number	1	Person to Contact		
	(		0002422438002	D5037300000000532502
In reply, refer to:				
Case #: 2422438	<b>:</b>			

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NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 2823:07022013/ 2422438 / 2823