AFN #2013001868 Recorded 08/21/2013 at 01:49 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: STEVEN JOHN ZI	RJACKS , also known as or
doing business as:	
SSN: xxx-xx-033	DOB: 02/17/1959
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	
	,C\\\
Assessor's Property Tax Parcel Accou	int Number:
	n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child nt of \$ 4,672.00 in SKAMANIA County on
	ne debtor named above except Tribal Trust property.
Only the property described in the	
August 16, 2013	K SAUNDERS
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(425) 438-4800	K SAUNDERS
Telephone Number	Person to Contact
In reply, refer to: Case #: 2306197	00053091A10028527A50000000105205

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NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 354:08162013/ 2306197 / 354