AFN #2013002086 Recorded 09/23/2013 at 03:31 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: GREGORIO IVAN doing business as:	LAYNA	, also known as or
	-	
SSN: <u>xxx-xx-419</u>	DOB: 02/28/1984	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		•
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 \$ 1,697.65 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.		
September 17, 2013	A EAGAN	1 -
Date	Authorized Representative DIVISION OF CHILD SUPPORT	
(206) 341-7000	A EAGAN	
Telephone Number	Person to Contact	
	0002452219005	8017060000000032502
In reply, refer to: Case #: 2452219	0,02452219005	3017080000000000032302

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 4882:09172013/ 2452219 / 4882