AFN #2013002351 Recorded 10/28/2013 at 02:05 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: DONALD JUNIOR WILDE			, also known as or
doing business as:		-	
SSN: <u>x</u>	XX-XX-2629	DOB: 03/15/1974	
Grantee or Creditor: The D	Department of Social a	and Health Services (DSHS)	
Legal Description:	6		
Assessor's Property Tax Pa	arcel Account Number		4.
Support (DCS) files a lien in All real and personal pr	or named above owes the amount of \$ 1,0 operty of the debtor na	amed above except Tribal T	Division of Child County on:
☐ Only the property descr	ibed in the Legal Des	cription section above.	<b>N</b>
October 21, 2013  Date  (360) 696-6100	J DEMIC Authorized F DIVISION O J DEMIC	Representative F CHILD SUPPORT	~
Telephone Number	Person to Co		
In reply, refer to:		<b>       </b>	3083200000000332502

Case #: 914559

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001)

FG VER: (1.4) 3520:10212013/ 914559 / 3520