AFN #2013002577 Recorded 11/27/2013 at 02:16 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

Granitor of Deptor. JAMES DOUGLAS	BARNES	, also known as or
doing business as: JAMES STEWART		A 7
JAMES SWEET		7 15.
SSN: <u>xxx-xx-110</u>	DOB: 11/29/1967	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		
Assessor's Property Tax Parcel Accou	unt Number:	
Child support payments, not paid whe DSHS claims that the debtor named a Support (DCS) files a lien in the amou	n due, are judgments and accrue to the bove owes past-due child support. The nt of \$ 28,101.31 in SKAMANIA	lien amount. Division of Child County on:
All real and personal property of the debtor named above except Tribal Trust property.		
☐ Only the property described in the		Y)
November 22, 2013	D MIES	, ,
Date	Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 664-6900	D MIES	b
Telephone Number	Person to Contact	
	0006930740018	9170900000000362502
In reply, refer to: Case #: 693074 626103		

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

FG VER: (1.4) 471:11222013/ 693074 / 471