AFN #2014000085 Recorded 01/16/2014 at 12:44 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: RAND	NDY RODNEY PIES		also known as an
doing business as:		-	, also known as or
-			7/2
	XXX-XX-5496	DOB: <u>03/31/19</u>	
Grantee or Creditor: The	Department of Social ar	nd Health Services (DSF	IS)
Legal Description:		• [4	*
	S		
Assessor's Property Tax I	Parcel Account Number:		4.
Child support payments, r DSHS claims that the deb Support (DCS) files a lien	in the amount of \$ $\frac{3}{7}$	past-due child support. 7	The Division of Child
All real and personal p	property of the debtor nar	med above except Triba	Trust property
☐ Only the property des	cribed in the Legal Descr	iption section above	rade property.
January 13, 2014 Date	M MARTIN		
	Authorized Re	presentative	
(509) 363-5000	M MARTIN	CHILD SUPPORT	
Telephone Number	Person to Con	tact	
In reply, refer to: Case #: 2352397		00023523970	0593464800000000072502
			FG VFR: (1.4)

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 4515:01132014/ 2352397 / 4515