AFN #2014000519 Recorded 03/31/2014 at 02:06 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: CHARLES CURT	'IS JOHNSON	, also known as or
doing business as: CHARLES CURT	ris Jonson	· A 3
CHARLES C JO	ONES	7
SSN: xxx-xx-4	DOB: 09/30/1965	
Grantee or Creditor: The Departme	ent of Social and Health Services (DSHS)	
Legal Description:		>
Assessor's Property Tax Parcel Acc	count Number:	
Child support payments, not paid w DSHS claims that the debtor named Support (DCS) files a lien in the am	hen due, are judgments and accrue to the dabove owes past-due child support. The ount of \$ 35,892.14 in SKAMANIA	e Division of Child
X All real and personal property o	f the debtor named above except Tribal T	rust property.
☐ Only the property described in t	he Legal Description section above.	N 3
March 24, 2014	L BLAIN	, -
Date	Authorized Representative DIVISION OF CHILD SUPPORT	
(360) 664-6900	L BLAIN	
Telephone Number	Person to Contact	
In reply, refer to: Case #: 1240804 2421803	30012408040020	77,313000000000042302

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 4896:03242014/ 1240804 / 4896