

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: ROBERT MICHAEL ALLRED, also known as or  
doing business as: \_\_\_\_\_

SSN: XXX-XX-2649 DOB: 02/06/1988

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 \$ 2,498.08 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.

March 26, 2014  
Date

(509) 363-5000  
Telephone Number

N PETERSON  
Authorized Representative  
DIVISION OF CHILD SUPPORT  
N PETERSON  
Person to Contact



In reply, refer to:  
Case #: 2262085