AFN #2014001452 Recorded 08/28/2014 at 03:21 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: KENNETH WAYNE | GANN , also known as or |
|--|--|
| doing business as: | |
| - | |
| SSN: <u>xxx-xx-227</u> | 7 DOB: 04/29/1972 . |
| Grantee or Creditor: The Department | of Social and Health Services (DSHS). |
| Legal Description: | |
| Assessor's Property Tax Parcel Account | nt Number: |
| DSHS claims that the debtor named al | n due, are judgments and accrue to the lien amount. Dove owes past-due child support. The Division of Child It of \$ 1,275.00 in SKAMANIA County on: |
| X All real and personal property of th | e debtor named above except Tribal Trust property. |
| ☐ Only the property described in the | Legal Description section above. |
| August 18, 2014 Date | C DESANTO Authorized Representative DIVISION OF CHILD SUPPORT |
| (360) 696-6100 | C DESANTO . |
| In reply refer to: | Person to Contact 00019531080051004030000000322502 |

Case #: 1953108

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 519:08182014/ 1953108 / 4899