AFN #2015000067 Recorded 01/14/2015 at 03:31 PM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 Auditor Robert J. Waymire 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: MILLARD FRA	NCIS FOSTER , also known as or
doing business as:	
SSN: <u>xxx-xx-</u>	9328 DOB: <u>04/06/1956</u> .
Grantee or Creditor: The Departm	ent of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel A	count Number:
	when due, are judgments and accrue to the lien amount. d above owes past-due child support. The Division of Child nount of \$ 52,744.00 in SKAMANTA 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.
January 08, 2015	M JOHNSON
Date	Authorized Representative DIVISION OF CHILD SUPPORT
(360) 696-6100	M JOHNSON
Telephone Number	Person to Contact
	0.0017962870023813190000000072502
In reply, refer to:	0001/3010000000000000000000000000000000

Case #: 1796287 2267521

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

FG VER: (1.4) 4879:01082015/ 1796287 / 4879