AFN #2015000331 Recorded 03/02/2015 at 04:06 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: BRANDON L WAHL | , also known as or |
|---|--|
| doing business as: | |
| SSN: <u>xxx-xx-85</u> 4 | DOB: 05/14/1976 |
| Grantee or Creditor: The Department | of Social and Health Services (DSHS). |
| Legal Description: | |
| Assessor's Property Tax Parcel Accou | unt Number: |
| Child support payments, not paid whe DSHS claims that the debtor named a Support (DCS) files a lien in the amou | n due, are judgments and accrue to the lien amount. bove owes past-due child support. The Division of Child nt of \$ 14,163.07 in SKAMANIA County on |
| All real and personal property of the Only the property described in the | ne debtor named above except Tribal Trust property. Legal Description section above. |
| February 23, 2015 Date | K ROCHA Authorized Representative DIVISION OF CHILD SUPPORT |
| (425) 438-4800 Telephone Number | K ROCHA Person to Contact |
| | 00012259190039441000000000000000000000000000000 |
| In reply, refer to: Case #: 1225819 | 333333333333333333333333333333333333333 |

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 08/2001) FG VER: (1.4) 1630:02232015/ 1225819 / 1630