AFN #2015000893 Recorded 05/13/2015 at 12:17 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: NIKOLAY KALACH	IK	, also known as or
doing business as:		ZA
		7/
SSN: <u>xxx-xx-278</u>	4 DOB: 07/13/1968 FEIN:	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		
Assessor's Property Tax Parcel Accou	int Number:	16.
Child support payments, not paid when claims that the debtor named above of (DCS) files a lien in the amount of \$ 3.3.	wes past-due child support. The l	to the lien amount. DSHS Division of Child Support County on:
All real and personal property of the	ne debtor named above except Tr	ibal Trust property.
☐ Only the property described in the Legal Description section above.		
May 06, 2015	J DEMICH	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(360) 696-6100	J DEMICH	
TELEPHONE NUMBER	PERSON TO CONTACT	-
In reply, refer to case numbers:	0001976	86900533259800000000022502
1976869		
		FG VER: (1.6)

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012) FG VER: (1.6) 3520:05062015/ 1976869 / 3520