AFN #2015001004 Recorded 05/28/2015 at 12:54 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: THOM I	EE JUNG			, also known as or
doing business as:			4 1	_A_3
·			<u> </u>	
SSN: XX	X-XX-0682 DO	B: 10/02/1984	_ FEIN:	
Grantee or Creditor: The D	epartment of Socia	al and Health Sen	rices (DSHS).	
Legal Description:			<u>ر</u> ر	•
Assessor's Property Tax Pa	rcel Account Num	ber:		4
Child support payments, no claims that the debtor name (DCS) files a lien in the ame	ed above owes pas ount of \$ 1,520.0	st-due child support o skama	rt. The Divisio	on of Child Support 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.				
May 14, 2015 DATE		TICH RIZED REPRESENTA ON OF CHILD SUPPOR) •
(360) 696-6100 TELEPHONE NUMBER	J DEM) '	
In reply, refer to case numb 2539784	ers:		00025397840062	252680000000042502
			EC	: VED: /1.6\

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012) FG VER: (1.6) 3520:05142015/ 2539784 / 3520