AFN #2015001366 Recorded 07/06/2015 at 04:37 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:	JONATHAN RAYMONI	LISTER		, also known as or
doing business as:			A /	
			, I	
	SSN: XXX-XX-7416	DOB: <u>11/13/1986</u>	FEIN:	
Grantee or Creditor: The Department of Social and Health Services (DSHS).				
Legal Description:			U)	
Assessor's Property Tax Parcel Account Number:				
claims that the deb	tor named above owe	lue, are judgments an s past-due child supp 74 69 in SKAM	ort. The Division	lien amount. DSHS 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.				
July 01, 2015 DATE	<u>s</u>		ATIVE	, ,
(360) 696-6100 TELEPHONE NUMBER		TRIPP ERSON TO CONTACT		•
In reply, refer to cas 2257212 19417			00022572120016	7014800000000222502

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012) FG VER: (1.8) 3358:07012015/ 2257212 / 3358