AFN #2015001554 Recorded 07/29/2015 at 10:45 AM 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: CHRISTOPHE N	1 RUSSO		, also known as or
doing business as:		- 4 - 1	
	0826 DOB: <u>04/24/198</u>		
Grantee or Creditor: The Departme	ent of Social and Health S	ervices (DSHS).
Legal Description:		U)	
Assessor's Property Tax Parcel Ac	count Number:	b	16
Child support payments, not paid we claims that the debtor named above (DCS) files a lien in the amount of \$1.000.	e owes past-due child sup	port. The Divis	e lien amount. DSHS sion of Child Support County on:
All real and personal property of	of the debtor named above	e except Tribal	Trust property.
Only the property described in		4.00	7
July 20, 2015	C BAILEY	_/_	1 -
DATE	AUTHORIZED REPRESEI DIVISION OF CHILD SUP		
(360) 696-6100	C BAILEY	_ II '	
TELEPHONE NUMBER	PERSON TO CONTACT		
		0002474396000	424285000000011860
In reply, refer to case numbers:		0002474336004	*24429300000000112502
2474396			
			FG VER: (1.8)
NOTICE AND STATEMENT OF LIEN		-	2372:07202015/

DSHS 09-282 (REV. 07/2012)

2474396 / 2372