AFN #2015001556 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: JACOB EDWARD C.	ARTER	, also known as or
doing business as:		
SSN: <u>xxx-xx-901</u>	7 <b>DOB</b> : 05/14/1988	FEIN:
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		
Assessor's Property Tax Parcel Accou	nt Number:	16
Child support payments, not paid wher claims that the debtor named above ov (DCS) files a lien in the amount of $$1,$$	ves past-due child suppor	t. The Division of Child Support
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 20, 2015 DATE	A RUNNELS AUTHORIZED REPRESENTA	TIVE.
	DIVISION OF CHILD SUPPOR	T .
(425) 438-4800 TELEPHONE NUMBER	A RUNNELS	
In reply, refer to case numbers:	PERSON TO CONTACT	00025135690061835040000000112502

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012) FG VER: (1.8) 3260:07202015/ 2513569 / 3845