AFN #2016000215 Recorded Feb 01, 2016 05:07 PM DocType: CHILD Filed by: DEPT OF SOCIAL & HEALTH SERVICES Page: 1 of 1 File Fee: \$0.00 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:	JASON W MILLICA	AN		, also known as or
doing business as:	JASON WILLIAM	TURPIN		,
-	JASON WILLIAM	MILLICAN		,
3	SSN:xxx-xx-856	6 DOB: 12/19/1983	FEIN:	
Grantee or Creditor:	The Department	of Social and Health Serv	rices (DSHS),	
Legal Description:	\sim C),	C	\mathcal{A}
Assessor's Property	Tax Parcel Accoun	nt Number:	1/2	
claims that the debto	or named above ov	n due, are judgments and ves past-due child suppor), 040.43 in SKAMA	rt. The Divisio	
X All real and pers	sonal property of the	e debtor named above ex	ccept Tribal Tru	ust property.
Only the property described in the Legal Description section above.				
January 25, 201 DATE	.6	O REDMAN AUTHORIZED REPRESENTA DIVISION OF CHILD SUPPOR	—	
(360) 696-6100 TELEPHONE NUMBER		O REDMAN PERSON TO CONTACT		eu

In reply, refer to case numbers: 2301404 1825416 1914108

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NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012) FG VER: (1.8) 515:01252016/ 2301404 / 515