AFN #2016001763 Recorded Aug 29, 2016 10:21 AM 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: HEATHER N LEONA  | ARD, also known as or  |
|---|--|
| doing business as:  |  |
|   | ,  |
| <b>SSN</b> : <u>xxx-xx-560</u>  | 4 DOB: <u>1/2/1987</u> FEIN:                                   |
| Grantee or Creditor: The Department   | of Social and Health Services (DSHS).                          |
| Legal Description:  | ), (0,)  |
| Assessor's Property Tax Parcel Accou  | nt Number:   |
| Child support payments, not paid when due, are judgments and accrue to the lien amount. DSHS claims that the debtor named above owes past-due child support. The Division of Child Support (DCS) files a lien in the amount of \$ 1,495.16 in SKAMANIA 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.                               |
| August 23, 2016  DATE   | A SPANGLER AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT |
| (509) 363-5000  | A SPANGLER   |
| TELEPHONE NUMBER  | PERSON TO CONTACT  |
|   |  |

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In reply, refer to case numbers: 2591457

FG VER: (1.8) 1828:08232016/ 2591457 / 1828