AFN #2017000253 Recorded Feb 06, 2017 01:17 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: ASHLEE C WILLIA	, also known as or
doing business as:	
	,
SSN: <u>xxx-xx-710</u>	6 DOB: 7/6/1984 FEIN: .
Grantee or Creditor: The Department	of Social and Health Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Account	nt Number:
	due, are judgments and accrue to the lien amount. DSHS was past-due child support. The Division of Child Support 4.42 in SKAMANIA County on:
X All real and personal property of the	e debtor named above except Tribal Trust property.
Only the property described in the	Legal Description section above.
February 01, 2017 DATE	A BRIGGS AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT
(509) 374-2000	A BRIGGS
TELEPHONE NUMBER	PERSON TO CONTACT
	000250830700125058800000000082502

In reply, refer to case numbers: 2508307

FG VER: (1.8) 3903:02012017/ 2508307 / 3903

NOTICE AND STATEMENT OF LIEN DSHS 09-282 (REV. 07/2012)