AFN #2017000960 Recorded May 15, 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: SHANE GEOFFREY	KORNELIUSSEN	_ , also known as or
doing business as:		<u> </u>
		,
SSN: <u>xxx-xx-829</u> 5	DOB: <u>10/9/1984</u> FEIN:	
Grantee or Creditor: The Department of	f Social and Health Services (DSHS)	1.
Legal-Description:		
Assessor's Property Tax Parcel Accour	nt Number:	
Child support payments, not paid when claims that the debtor named above ow (DCS) files a lien in the amount of \$ 3,	/es past-due child support. The Divis	County on:
X All real and personal property of the	e debtor named above except Tribal	Trust property.
Only the property described in the		
May 12, 2017 DATE	S OFFICER 4238 AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(206) 341-7000	S OFFICER 4238 PERSON TO CONTACT	
In reply, refer to case numbers:	000185128000	.51298260000000013 2 502

FG VER: (1.8) 4238:05122017/ 1851280 / 4238

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