AFN #2017001369 Recorded Jul 03, 2017 01:42 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: JAMES JOHN MADI	, a	lso known as or
doing business as: JAMES J MADOUX		,
JAMES J MADDOX		
SSN: xxx-xx-953	0_DOB: <u>3/8/1990</u> FEIN:	_
Grantee or Creditor: The Department	of Social and Health Services (DSHS).	
Legal Description:	7	
)]
Assessor's Property Tax Parcel Account		
Child support payments, not paid when claims that the debtor named above ow (DCS) files a lien in the amount of \$ 9,	n due, are judgments and accrue to the lie ves past-due child support. The Division 193.54 in SKAMANIA	n amount. DSHS of Child Support County on:
All real and personal property of the	e debtor named above except Tribal Trus	t property.
☐ Only the property described in the		· · ·
June 28, 2017	R GEDDINGS	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(360) 696-6100	R GEDDINGS	
TELEPHONE NUMBER	PERSON TO CONTACT	,
		200000000120502
In reply, refer to case numbers:	00021460/50044008	390000000132302 100
2146075		,
	•	R: (1.8) 9:06282017/

2146075 / 83

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