AFN #2017002335 Recorded Nov 07, 2017 08:36 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

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

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

Notice and Statement of Lien

Grantor or Debtor: MICHELLE N GUZI	MAN , also known as or	_
doing business as:		
SSN:xxx-xx-410	5 DOB: 12/26/1994 FEIN: .	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:	The first of the contract of t	
Assessor's Property Tax Parcel Accou	int Number:	
claims that the debtor named above ov	n due, are judgments and accrue to the lien amount. DSHS wes past-due child support. The Division of Child Support	
(DCS) files a lien in the amount of \$ 8		
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.	
November 01, 2017	s gonzalez	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	_
(509) 374-2000	S GONZALEZ	_
TELEPHONE NUMBER	PERSON TO CONTACT	
In reply, refer to case numbers:	0002483759003871000000000182502	
2483759 2668926		
,		
	_ FG VER: (1.8)	
	1401:11012017/	

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