AFN #2018000807 Recorded Apr 24, 2018 01:52 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

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: HECTOR MEJIA | . (.4.) | , also known as or |
|--|--|--|
| doing business as: | | |
| | | |
| SSN: <u>xxx-xx-73</u> | 31 DOB: 6/15/1972 FEIN: _ | · |
| Grantee or Creditor: The Department | of Social and Health Services (DS | HS). |
| Legal Description: | | |
| |) (| |
| Assessor's Property Tax Parcel Accord | | |
| Child support payments, not paid who claims that the debtor named above (DCS) files a lien in the amount of \$ 2 | owes past-due child support. The D | o the lien amount. DSHS Division of Child Support County on: |
| All real and personal property of t | he debtor named above except Tril | oal Trust property. |
| | Legal Description section above. | |
| April 19, 2018 DATE | V RASMUSSEN AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT | <u> </u> |
| (509) 374-2000 TELEPHONE NUMBER | V RASMUSSEN PERSON TO CONTACT | <u> </u> |
| | 0002508 | 2840063281740000000012502 |
| In reply, refer to case numbers: | | |
| 2600204 | in . | |

FG VER: (1.8) 4360:04192018/ 2609284 / 4360