AFN #2018000820 Recorded Apr 25, 2018 02:58 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: ${ t M}$	ICHAEL D POPE	7 7 7	<u> </u>		_ , also known as or
doing business as:			1		•
_			- 1		4
S	SN: <u>xxx-xx-1676</u>	DOB: 9/14	/1962	FEIN:	
Grantee or Creditor:	The Department of	of Social and H	ealth Serv	ices (DSHS)	
Legal-Description:	· ·		-		
4 4	1/			(	) )
Assessor's Property	Tax Parcel Accour	nt Number:			
claims that the debto (DCS) files a lien in t	r named above ow he amount of \$ 9,	es past-due ch	hild suppor in <u>skama</u>	rt. The Divisi	County on:
X All real and person	onal property of the	e debtor name	d above ex	ccept Tribal T	rust property.
Only the property	described in the l	egal Descripti	on section	above.	
April 23, 2018		K EASTMAN	<i>p</i>		
DATE		AUTHORIZED REDIVISION OF CH			
(509) 363-5000		K EASTMAN			
TELEPHONE NUMBER		PERSON TO CO	NTACT		2
In reply, refer to case 2594041	∍ numbers:			0002594041006	330487800000000012502

FG VER: (1.8) 4056:04232018/ 2594041 / 4056

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