AFN #2018001155 Recorded Jun 04, 2018 03:52 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: THOMAS BUREN Y	EO .	_ , also known as or
doing business as:		
SSN:xxx-xx-005	0 DOB: <u>12/9/1994</u> FEIN:	
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:		
Assessor's Property Tax Parcel Accou		
Child support payments, not paid wher claims that the debtor named above ov (DCS) files a lien in the amount of \$ 2.  All real and personal property of the content of the	ves past-due child support. The Divis , 393.46 in SKAMANIA e debtor named above except Tribal	ion of Child Support County on:
Only the property described in the	Legal Description section above.	•
May 29, 2018 DATE	C SCOTT AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(425) 438-4800 TELEPHONE NUMBER	C SCOTT PERSON TO CONTACT	<u> </u>
In reply, refer to case numbers: 2656903	000265690300	540104800000000092502
		EC VED: /1.8)

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