AFN #2018002149 Recorded Oct 22, 2018 03:15 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: JAMIE C SATTERT	, also known as or
doing business as:	
SSN:xxx-xx-0166	DOB: 1/7/1991 FEIN:
Grantee or Creditor: The Department of Social and Health Services (DSHS).	
Legal-Description:	
Assessor's Property Tax Parcel Accoun	t Number:
Child support payments, not paid when claims that the debtor named above ow (DCS) files a lien in the amount of \$ 6,	due, are judgments and accrue to the lien amount. DSHS es past-due child support. The Division of Child Support 808.00 in SKAMANIA County on:
X All real and personal property of the	e debtor named above except Tribal Trust property.
Only the property described in the L	
October 19, 2018	S KISH AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT
(509) 363-5000	S KISH
TELEPHONE NUMBER	PERSON TO CONTACT
In reply, refer to case numbers:	00026216000058198340000000332502

2621600 2433541 2478904 2578091

FG VER: (1.8) 4763:10192018/ 2621600 / 4763

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