AFN #2019000353 Recorded Mar 11, 2019 02:14 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: NICHOLAS DUCHES	ENEAU		, also known as or
doing business as:			
	/		
SSN: xxx-xx-700	9 DOB: 10/26/1984	_ FEIN:	
Grantee or Creditor: The Department of	of Social and Health Serv	rices (DSHŞ).	
Legal Description:	)	<b>(C</b>	
Assessor's Property Tax Parcel Account	nt Number:	TI	<u> </u>
Child support payments, not paid when claims that the debtor named above ow (DCS) files a lien in the amount of \$ 11	ves past-due child suppo	rt. The Divisi	
All real and personal property of the	e debtor named above e	xcept Tribal T	rust property.
☐ Only the property described in the	Legal Description section	n above.	ve¥ A e
March 07, 2019  DATE	W SPARKS AUTHORIZED REPRESENTADIVISION OF CHILD SUPPO		
(206) 341-7000 TELEPHONE NUMBER	W SPARKS PERSON TO CONTACT		
In reply, refer to case numbers:		0002757181001	21071400000000012502

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FG VER: (1.8) 2091:03072019/ 2757181 / 2091

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