AFN #2019000775 Recorded May 20, 2019 02:53 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: AARON ISAIAH M	CDANNELT	, also known as or
	CDANNELL	_ , also known as of
doing business as:	- A- A-	· ·
	FEIN	······································
SSN: <u>XXX-XX-740</u>	9 DOB: <u>9/3/1985</u> FEIN:	-
Grantee or Creditor: The Department of Social and Health Services (DSHS).		
Legal Description:	ale i Mariana i je	
)) .
Assessor's Property Tax Parcel Account Number:		
Child support payments, not paid wher claims that the debtor named above of (DCS) files a lien in the amount of \$ 1. All real and personal property of the Only the property described in the	wes past-due child support. The Divis 1,145.06 in SKAMANIA e debtor named above except Tribal	ion of Child SupportCounty on:
May 15, 2019	A HARMON	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(360) 664-6900	A HARMON	
TELEPHONE NUMBER	PERSON TO CONTACT	
In reply, refer to case numbers:	000190124200:	131783900000000352502
. · ·		3285:05152019/

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