Skamania County, WA
Total:\$0.00
CHILD
Pgs=1
Request of: WASHINGTON STATE DEPARTMENT OF F
00001996201900024770010011

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 Deptor.	BENJAMIN JAMES	CHANDLER		, also known as or
doing business as:	7			
· ·				
	SSN: XXX-XX-330	5 DOB: 10/11/1982	FEIN:	
Grantee or Creditor	r: The Department o	of Social and Health Serv	rices (DSHS).	
Legal Description:	~	B. B.		
)	\mathcal{C}	
Assessor's Propert	y Tax Parcel Accour	nt Number:		
claims that the deb		due, are judgments and ves past-due child suppo 004.39 in SKAMZ	rt. The Divisio	
All real and per	sonal property of the	debtor named above ex	cept Tribal Tr	ust property.
Only the proper	rty described in the I	egal Description section	above.	
December 12, 2 DATE	019	J GONZALES AUTHORIZED REPRESENTA DIVISION OF CHILD SUPPOR	TIVE	
(206) 341-7000 TELEPHONE NUMBER		J GONZALES PERSON TO CONTACT		
In reply, refer to cas	se numbers:		000271345900648	8113000000032502

FG VER: (1.8) 2053:12122019/ 2713459 / 2053

2713459