Skamania County, WA Total:\$0.00 CHILD Pgs=1

2021-003046

09/07/2021 02:17 PM

Request of: WASHINGTON STATE DEPARTMENT OF I



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: TAM	ARA G FREEMA	AN	, also kno	own as or
doing business as: TAM	ARA G LSEEM	AN		,
TAM	ARA GAIL FRI	EEMAN		,
SSN	1: <u>xxx-xx-</u> 858	8 DOB: 4/8/1976	FEIN:	<u>.</u>
Grantee or Creditor: Th	ne Department o	of Social and Health Ser	vices (DSHS).	A.
Legal Description:				1
Assessor's Property Ta	x Parcel Accour	nt Number:		₩.
claims that the debtor n	amed above ow	due, are judgments and ves past-due child suppo 043.52 in SKAM	ort. The Division of Child	d Support
All real and persona	al property of the	e debtor named above e	xcept Tribal Trust prope	erty.
☐ Only the property de	escribed in the	Legal Description section	n above.	•
September 03, 202		R MEESE AUTHORIZED REPRESENT DIVISION OF CHILD SUPPO	ATIVE	
(509) 363-5000		R MEESE		
TELEPHONE NUMBER		PERSON TO CONTACT		

00026714270036577630000000742502

In reply, refer to case numbers: 2671427

FG VER: (1.8)

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

2348:09032021/ 2671427 / 2348