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

2023-000852 06/20/2023 11:44 AM

Request of: WASHINGTON STATE DEPARTMENT OF I

00016168202300008520010011

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: DENNIS NICHOLAS	SABO	_ , also known as or
doing business as:		,
		,
SSN: xxx-xx-3589	DOB: 5/31/1978 FEIN:	
Grantee or Creditor: The Department of	f Social and Health Services (DSHS).
Legal Description:		<u> </u>
	J = 4	7 7
Assessor's Property Tax Parcel Accoun	it Number:	
Child support payments, not paid when claims that the debtor named above ow (DCS) files a lien in the amount of \$ 22	es past-due child support. The Divi	ne lien amount. DSHS sion of Child Support County on:
All real and personal property of the		Trust property.
☐ Only the property described in the L		
	B TERRY AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(300) 030 0200	B TERRY PERSON TO CONTACT	

00013722410011767640000000822502

In reply, refer to case numbers: 1372241 1567338 1950538 1655105

FG VER: (1.8) 61:06132023/ 1372241 / 61