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

2023-000885 06/26/2023 08:23 AM

Request of: WASHINGTON STATE DEPARTMENT OF I

0001620820230008850010013

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: JOSHUA DALE	COWAN	, also known as or
doing business as:	7/7/7/7	
·	LAN	
SSN: xxx-xx-	8364 DOB: 6/7/1988 F	EIN:
Grantee or Creditor: The Departme	ent of Social and Health Services	s (DSHS).
Legal Description:		$\mathcal{K}_{\mathcal{O}}$
Assessor's Property Tax Parcel Ac	count Number:	
Child support payments, not paid we claims that the debtor named above (DCS) files a lien in the amount of statement of the control of the co	e owes past-due child support.	The Division of Child Support
All real and personal property	of the debtor named above exce	ot Tribal Trust property.
Only the property described in	the Legal Description section ab	ove.
June 21, 2023	M KIEHN	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	
(509) 363-5000	M KIEHN	
TELEPHONE NUMBER	PERSON TO CONTACT	
In reply, refer to case numbers:		00280519300662998400000000162502

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

2805193

FG VER: (1.8) 4026:06212023/ 2805193 / 4026