Skamania County, WA Total:\$0.00 CHILD

2024-001004 07/29/2024 10:59 AM

Request of: WASHINGTON STATE DEPARTMENT OF H

00019020202400010040010019

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: CHESTER L JOH	NSON	, also known as or
doing business as:	4242	<u> </u>
		,
SSN: xxx-xx-34	19 DOB: 10/28/1988 F	FEIN:
Grantee or Creditor: The Departmen	t of Social and Health Service	es (DSHS).
Legal Description:		
Assessor's Property Tax Parcel Acco	ount Number:	
Child support payments, not paid wh claims that the debtor named above (DCS) files a lien in the amount of \$	owes past-due child support.	The Division of Child Support
All real and personal property of	the debtor named above exce	pt Tribal Trust property.
Only the property described in th		
July 23, 2024	B BAILEY	
DATE	AUTHORIZED REPRESENTATIVE DIVISION OF CHILD SUPPORT	/E
(509) 374-2000	B BAILEY	
TELEPHONE NUMBER	PERSON TO CONTACT	

000297415100693925100000000012502

In reply, refer to case numbers: 2974151

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

FG VER: (1.8) 736:07232024/ 2974151 / 736