Skamania County, WA Total:\$0.00 CHILD

2025-000232

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02/19/2025 11:25 AM

Request of: WASHINGTON STATE DEPARTMENT OF ${\sf H}$



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: TYLER G S	STACY	, also known as or
doing business as:		
		,
SSN: <u>xxx</u> -	XX-0548 DOB: 2/9/1990	FEIN:
Grantee or Creditor: The Depa	artment of Social and Health Sei	rvices (DSHS).
Légal Déscription:	0,	
Assessor's Property Tax Parce	Account Number:	(
	above owes past-due child supp	d accrue to the lien amount. DSHS ort. The Division of Child Support County on:
All real and personal prope	erty of the debtor named above	except Tribal Trust property.
☐ Only the property describe	d in the Legal Description section	on above.
February 11, 2025 DATE	S ABDUR RAHEEM AUTHORIZED REPRESENT DIVISION OF CHILD SUPPO	
(360) 696-6100 TELEPHONE NUMBER	S ABDUR RAHEEM PERSON TO CONTACT	
		00029719290038688940000000032502

In reply, refer to case numbers: 2971929



FG VER: (1.8) 61:02112025/ 2971929 / 2223

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