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

2025-000956

06/24/2025 10:21 AM

Request of: WASHINGTON STATE DEPARTMENT OF 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: KIRSTAN DANNIELE POISSONNIER	, also known as or
doing business as:	
SSN: <u>xxx-xx-8555</u> DOB: <u>8/5/1994</u>	FEIN:
Grantee or Creditor: The Department of Social and Health	Services (DSHS).
Legal Description:	
Assessor's Property Tax Parcel Account Number:	_ \
Child support payments, not paid when due, are judgments claims that the debtor named above owes past-due child su (DCS) files a lien in the amount of \$ 1,926.67 in SE	apport. The Division of Child Support
All real and personal property of the debtor named about	ve except Tribal Trust property.
$\Box$ Only the property described in the Legal Description se	ction above.
June 13, 2025 C WILLIAMS	
DATE AUTHORIZED REPRES DIVISION OF CHILD SU	
(425) 438-4800 <u>C WILLIAMS</u>	· · · · · · · · · · · · · · · · · · ·
TELEPHONE NUMBER PERSON TO CONTACT	•
In reply, refer to case numbers:	00029824330047638640000000132502

2982433

FG VER: (1.8) 3780:06132025/

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