BOOK 104 PAGE 735

AMENDMENT TO	NOTICE
AND STATEMENT	

Name SMITH, John M.

Case Number 30-C/F-009100-0

ment of Social and Health Services, under date	ion on the lien filed by the State of Washington, Depart- of February 23, 1987, recorded by the Auditor of k. 104 of at page302, as follows:
This lien is hereby amended to EXCLUDE	the following property ONLY:
of Plats, Page 16, under Skamania Co	orth Bonneville, recorded in Book "B" unty file no. 83466, also recorded in amania County file no. 84429, records
D.S.H.S	
APR 6 12,37 PH 187	
AUDITOR GARY M. OLSON	Charlyn D Shipley
111	Charlyn D. Shipley Financial Recovery Enforcement Officer III
State of Washington ss.  County of Thurston	~ ( ) \ \
I certify that I know or have satisfactory evider	nce that Charlyn D. Shipley
signed this instrument, in oath stated that (he/she edged it as an officer of the Department of Social	and Health Services to be the free and voluntary act of
such party for the uses and purposes mentione	of first instrument.
Dated: April 1, 1987	Mulana Jumes
Dated: //ugu	Notar Public in and for the State of Olympia
OF WAS	His appointment expires 3, 10, 88
RETURN TO:	
Department of Social and Health Services	Deniciared

RETURN TO:
Department of Social and Health Services
Office of Financial Recovery
P.O. Box 9501, MS OB-21
Olympia, Washington 98504
Phone: (206) 753-1325

DSHS 9-368 (Rev 2/86) QX A-227

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